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COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJ	Name of corporation - must include suffix
Dear S	r or Madam:
"Certif	closed "Application by Foreign Corporation for Authorization to Transact Business in Florida," cate of Existence," or "Certificate of Good Standing" and check are submitted to register the eferenced foreign corporation to transact business in Florida.
Please	eturn all correspondence concerning this matter to the following:
	Robert Richards Name of Person
	Name of Person
$\underline{\hspace{1cm}}$	Nited Erection Company, Ivc Firm/Company
	2 DLD SPRINGS ROAD
ر مر	Address
	Peruguille, Al 35146 City/State and Zip code
	City/State and Zip code Vector Garage Com E-mail address: (to be used for future annual report notification) her information concerning this matter, please call:
(/E-mail address: (to be used for future annual report notification)
For fur	her information concerning this matter, please call:
R.	her information concerning this matter, please call: Chards
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclose	d is a check for the following amount:
□ ^{\$7}	0.00 Filing Fee \$\ \text{S78.75 Filing Fee & Certificate of Status} \tag{\$78.75 Filing Fee & Certificate of Status & Certified Copy} \tag{\$87.50 Filing Fee, Certified Copy}

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

If name unavaila	ble in Florida, enter alternate corporate name adopted for the purpose of transactir	ig business in Florida)
ALABAN	A 199-212 under the law of which it is incorporated) (FEI number, if app	
	·	
Nov. 25	of incorporation) 5. Perpetual (Duration: Year corp. will cease to	
(Date		
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, V.S., to determine penalty liability	
	(Date first transacted business in Florida, if prior to registration)	
100	(SEE SECTIONS 607.1301 & 607.1302-7.5., to determine penalty habit	- () () () () () () () () () (
187 001	O Springs Road Springville, Af 35 (Principal office address)	. 146
15/0	(Principal office andress)	(1
10,5 000	Springs Romo Springuelle Al 35 (Current mailing address)	,146
	(ourself maring address)	
Instace	Steel ON CONSTRUCTION Projects of corporation authorized in home state or country to be carried out in state of Flo	ř`
(Purpose(s)	of corporation authorized in home state or country to be carried out in state of Flo	orida) 🚉
Name and street	address of Florida registered agent: (P.O. Box NOT acceptable)	orida)
	_	S
Name:	In Corp Services, Inc.	<u></u>
ice Address:	17888 67th Court North	f
	1 - h + h - r1 - 221172	
	Loxahatchee, FL, Florida 33470 (City) (Zip code)	* ,

designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: **B. OFFICERS** Address: 182 DLD SPRINGS FOAD Vice President: Address: Sprink ville, ROAD Treasurer: ___ Address: ____ NOTE: If necessary, you may attack an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a

(Typed or printed name and capacity of person signing application)

third degree felony as provided for in s.817.155, F.S.

ROBERT

Beth Chapman Secretary of State P. O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that United Erection Company, Inc. was formed in Saint Clair County, Alabama on November 25, 1998. The Alabama Entity Identification number for this entity is 199-212. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.





20110302000004905

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

3/2/2011

Date

Beth Chapman

Beth Chapman

Secretary of State