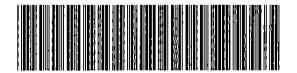
(Requestor's Name)
(Address)
(Address)
(Audiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Harrie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





500211143555

08/30/11--01003--025 **70.00

11 AUG 30 AM II: 27

FILED

COVER LETTER

11 AUG 30 AM 11: 37

Certified Copy

TO:	New Filing Sect Division of Cor			SECRETARY OF STATE TALLAHASSEE, FLORID
SUR	IECT: A&D	Welding, Inc		
5020			ation - must include suffix	
Dear S	Sir or Madam:			
"Certi	ificate of Existence		for Authorization to Transa Standing" and check are sub usiness in Florida.	
Please	e return all corresp	ondence concerning this m	atter to the following:	
Brya	an Hill, Presi	dent		
		Nam	e of Person	
A &	D Welding,	Inc		
		Firm/	Company	
265	0 Strawn R	oad		
		A	Address	
Win	ston, GA 30°	187		
			ate and Zip code	
hillhi	ill@bellsouth.i	net		
			sed for future annual report	notification)
For fu	orther information	concerning this matter, ple	ase call:	
Rrys	an Hill	. 770	0 . 040 4150	
Diye	Name of Persor	at (<u>''''</u>	0 949-4150 Area Code & Daytime Teleph	one Number
	Traine of Follow	•		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327		
	2661 Executive Tallahassee, FL	32301	Tallahassee, f	FL 32314
Enclo	sed is a check for	the following amount:		
√ ¹	70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

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.

ι.	A & D Welding, Inc (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"				
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")				
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)				
2	Georgia 3. 58-2512750				
۷.	(State or country under the law of which it is incorporated) (FEI number, if applicable)				
4.	01/10/2000 _{5.} Perpetual				
•	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")				
6.	Not Applicable				
	(Date first transacted business in Florida, if prior to registration)				
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)				
7.	2650 Strawn Road, Winston, GA 30187				
	(Principal office address)				
	P O Box 665, Winston, GA 30187				
	(Current mailing address)				
8.	Any and all lawful business (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)				
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)				
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)					
	Name: James Henry Langsenkamp				
0	ffice Address: 2307 Overlook Drive				
	Mount Dora , Florida 32757				
	(City) (Zip code)				

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place 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: FILED A. DIRECTORS Chairman: Not Applicable Address: TALLAHASSEE, FLORIDA Vice Chairman: Not Applicable Address: _____ Director: Not Applicable Address: _____ Director: Not Applicable Address: **B. OFFICERS** President: Bryan Hill Address: 2650 Strawn Road Winston, GA 30187 Vice President: None Secretary: Rhonda Wylie Address: 2650 Strawn Road, Winston, GA 30187 Treasurer: None Address: ___ NOTE: If necessary, you may attach 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 third degree felony as provided for in s.817.155, F.S. 14. Bryan Hill, President

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

Control No. 0001795

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF

EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

A & D WELDING, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 01/10/2000 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 23rd day of August, 2011

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 7695461-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp