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

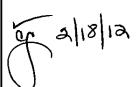
Office Use Only



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COVER LETTER

TO:

| New Filing Section Division of Corporations | | | |
|--|---|------------------------------|--|
| SUBJECT: ELECTRICAL TEST LABS (| OF GEORGIA, INC. | | |
| Name of corporation - m | ust include suffix | | |
| Dear Sir or Madam: | | | |
| The enclosed "Application by Foreign Corporation for Aut "Certificate of Existence," or "Certificate of Good Standing above referenced foreign corporation to transact business in | g" and check are submitted to registe | | |
| Please return all correspondence concerning this matter to | he following: | | |
| Linda E. Grondahl, President | | | |
| Name of Per | son | | |
| Electrical Test Labs of Georgia, Inc | | | |
| Firm/Compan | y | | |
| P. O. Box 217 | | | |
| Address | | | |
| Valdosta, GA 31603 | | | |
| City/State and 2 | Zip code | | |
| linda@electricaltestlabs.com | | | |
| E-mail address: (to be used for f | uture annual report notification) | | |
| For further information concerning this matter, please call: | | | |
| Linda E. Grondahl at (229) | 559-0109 | U D | |
| | e & Daytime Telephone Number | SECRLE IVISICAS 12 FEB | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: | 一 | |
| New Filing Section | New Filing Section | | |
| Division of Corporations Clifton Building | Division of Corporations P.O. Box 6327 | ာ့ | |
| 2661 Executive Center Circle | Tallahassee, FL 32314 | 60 | |
| Tallahassee, FL 32301 | | SWC | |
| Enclosed is a check for the following amount: | | | |
| | 8.75 Filing Fee & S87.50 Filertified Copy Certificate | e 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.

| 1. | Electrical Test Labs of Georgia, 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 Flor | ida) |
| 2. | Georgia 3. 58-2350047 | | |
| | (State or country under the law of which it is incorporated) (FEI number, if applicable) | | |
| 4. | 2/6/2012 (date requested) 5. Perpetual | | |
| | (Date of incorporation) (Duration: Year corp. will cease to exist or "p | erpetu | al") |
| 6. | | | |
| | (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) | | |
| 7. | 6553 Lakes Industrial Parkway, Lake Park, GA 31636 | | |
| | (Principal office address) | | |
| | P. O. Box 217, Valdosta, GA 31603 | | |
| | (Current mailing address) | | |
| 8. | Di-electrically test the safety equipment used by utility workers. | | 3. |
| | (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) | FEB | |
| 9. | Name and street address of Florida registered agent: (P.O. Box NOT acceptable) | 8 16 | |
| | Name: Ron Maxwell - Maxwell Tax & Accounting, Inc. | ₽ | - COS |
| O | ffice Address: 1011 E. Norvell Bryant Highway | 19:03 | E, STA |
| | Hernando , Florida 34442 | \Im | TION 3 |
| | (City) (Zip code) | | ₹S |
| 1.0 | Desirate and a continuous | | |

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.

RD Manufacture)
(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: +1LED SECRETARY OF STATE A. DIRECTORS NIVISH R OF CORPORATIONS Chairman: 12 FEB 16 AM 9: 04 Vice Chairman: Address: Director: Address: B. OFFICERS President: Linda E. Grondahl Address: 405 Georgetown Circle Valdosta, GA 31602 Vice President: Address: Secretary: William S. Grondahl Address: 405 Georgetown Circle, Valdosta, GA 31602 Treasurer: 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.

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

14. Linda E. Grondahl, President

Control No. K736702

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive 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

ELECTRICAL TEST LABS OF GEORGIA, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 10/03/1997 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 12th day of February, 2012

B: P.h-

Brian P. Kemp Secretary of State

Certification Number: 8095646-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp