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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607. I 503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

Ine.," "Co.," "Co	rp." "Ιπς," *Co," or "Corp.")			
ifnamo unavaila	ble in Florida, enter alternate corp	orate name a	dopted for the purpose of transacting business in Florida)	
Colorado	inder the law of which it is incorp	3	(FEI number, if applicable)	
		orated)	(FEI number, if applicable)	
February *	16, 2012	5.	perpetual (Duration: Year corp. will cease to exist or "perpetual")	
(Date	of incorporation)		(Duration: Year cosp. will cease to exist or "perpetual")	
	(SEE SECTIONS 607.15	01 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liability)	
2300	Silver Star Rd., Orlan			
	•	al office addn		٨,
134			ncouver, BC, Canada V6B 2K4	
alu:1118-a u a a		mailing addr	•	12100
	rvices contractor and		OF (2WTU) DUSINGSS. Lintry to be carried out in state of Florida)	-
(Disamont)	A OF COLDOLDINOU WHILIDUSED III NOL	ite State of co	Butth to be entitled one in serie of a tolina)	
-	•			
-	et address of Florida registered	agent: (P.O	. Box NOT acceptable)	
-	•	-	Box NOT acceptable)	
Name and street	et address of Florida registered	tem	Box NOT acceptable)	
Name and stress	ct address of Florida registered CT Corporation System 1200 South Pine islan	tem d Road		
Name and street	et address of Florida registered CT Corporation Systems	tem d Road	Box NOT acceptable) , Florida 33324 (Zip code)	
Name and stress Name: Maine: Mice Address: Name: Mice Address: Name: Mice Address: Name: Mice Address: Mice Address:	CT Corporation Systems CT Corporation Systems 1200 South Pine Islan Plantation (City) gent's acceptance: and as registered agent and to a application, I hereby accept it.	d Road accept servicite appoints	, Florida 33324 (Zip code) ce of process for the above stated corporation at the ment as registered agent and agree to act in this cape elative to the proper and complete performance of n	clip
Name and stress Name: Mice Address: Registered a aving been namesignated in this rapree to a	CT Corporation Systemation Systemation Systemation Systemation Systemation Systemation (City) gent's acceptance; and as registered agent and to a application, I hereby accept it comply with the provisions of a	d Road accept servicite appoints	Thorida 33324 (Zip code) ce of process for the above stated corporation at the ment as registered agent and agree to act in this capallative to the proper and complete performance of a sition as registered agent. Connie Bryan	cli
Name and stress Name: Maine: Mice Address: Name: Mice Address: Name: Mice Address: Name: Mice Address: Mice Address:	CT Corporation Systemation Systemation Systemation Systemation Systemation Systemation (City) gent's acceptance; and as registered agent and to a application, I hereby accept it comply with the provisions of a	d Road accept service appointment statutes of my positions of	, Florida 33324 (Zip code) ce of process for the above stated corporation at the nent as registered agent and agree to act in this capelative to the proper and complete performance of nestion as registered agent. Connie Bryan	cii

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.

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12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address;
North-control of the control of the
Vice Chairman:
Address:
Data Name -1-
Director: Bob Nowack
Address: 134 Abbott Street, Sulte 500, Vancouver, BC, Canada V6B 2K4
Director: Jlm Bond
Address: 134 Abbott Street, Suite 500, Vancouver, BC, Canada V6B 2K4
B, OFFICERS
President: Bob Nowack
Address: 134 Abbott Street, Suite 500, Vancouver, BC, Canada V6B 2K4
2
Vice President:
Vice President:
Secretary: Jim Bond
Address: 134 Abbott Street, Suite 500, Vancouver, BC, Canada V6B 2K4
Trensurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors,
13. Signature of Private and Office.
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. Bob Nowack, President
(Tunet or printed name and generity of namen cloudes and leation)

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OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

Trenchless Crossings Inc.

is a Corporation formed or registered on 02/15/2012 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20121097705.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/23/2012 that have been posted, and by documents delivered to this office electronically through 02/24/2012 @ 11:48:56.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 02/24/2012 @ 11:48:56 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8176395.



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Calarado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.nos.state.co.us/bjr/CertificateScarchiCriteria.da entering the certificate and interaction number displayed on the certificate, and following the instructions displayed. Confirming the Issuance of a certificate is merely antional and in material and effective Issuance of a certificate. For more information, visit our Web site, http://www.sox.state.co.us/click Business Center and select "Frequently Asked Questions."