

**F12 000001833**

**Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : TRIAD PROFESSIONAL SERVICES, LLC  
Account Number : I20020000094  
Phone : (770)777-2091  
Fax Number : (770)220-1943

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**Shubert & Salzer, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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**J. Shivers MAY 01 2012**

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Schubert & Salzer, Inc.  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Elissa Hart

Name of Person

Smith, Gambrell & Russell, LLP

Firm/Company

1230 Peachtree St., Suite 3100

Address

Atlanta, GA 30309

City/State and Zip code

ehart@sgrlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elissa Hart

Name of Person

at (404) 815-3500

Area Code & Daytime Telephone Number

**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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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**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. Schubert & Salzer, 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

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. 9/16/1999

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4601 Corporate Drive N.W., Suite 100, Concord, NC 28027

(Principal office address)

4601 Corporate Drive N.W., Suite 100, Concord, NC 28027

(Current mailing address)

8. sale of industrial valves

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 515 East Park Avenue

Tallahassee

(City)

, Florida 32301

(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.*

NRAI Services, Inc.

By: [Signature]

(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.

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## 12. Names and business addresses of officers and/or directors:

## A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

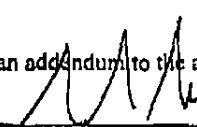
Address: \_\_\_\_\_

Director: Dr. Arnold KawlathAddress: 4601 Corporate Drive N.W., Suite 100 Concord, NC 28027Director: Dr. Rainer LangeAddress: 4601 Corporate Drive N.W., Suite 100 Concord, NC 28027

## B. OFFICERS

President: Dr. Rainer LangeAddress: 4601 Corporate Drive N.W., Suite 100 Concord, NC 28027Vice President: Doug RoyAddress: 4601 Corporate Drive N.W., Suite 100 Concord, NC 28027Secretary: Hans-Michael KrausAddress: 4601 Corporate Drive N.W., Suite 100 Concord, NC 28027Treasurer: Ute ZieglerAddress: 4601 Corporate Drive N.W., Suite 100 Concord, NC 28027

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)14. Hans-Michael Kraus - Secretary  
(Typed or printed name and capacity of person signing application)2012 APR 30 AM 10:35  
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TALLAHASSEE, FLORIDA

2012 APR 30

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**STATE OF GEORGIA****Secretary of State**

Corporations Division  
313 West Tower  
2 Martin Luther King, Jr. Drive  
Atlanta, Georgia 30334-1530

**CERTIFICATE  
OF  
EXISTENCE**

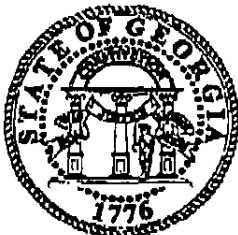
I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

**SCHUBERT & SALZER, INC.****Domestic Profit Corporation**

was formed or was authorized to transact business on 09/16/1999 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 30th day of April, 2012

Brian P. Kemp  
Secretary of State

Certification Number: 9031714-1 Reference:  
Verify this certificate online at <http://corp.sos.state.ga.us/corp/soskb/verify.asp>

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