

# F12000002694

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6381

From:  
Account Name : LATHAM, SHUKER, EDEN & BEAUDINE, LLP  
Account Number : I20000000025  
Phone : (407) 481-5800  
Fax Number : (407) 481-5801

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

Email Address: gbinkley@LSEBLAW.COM

**FOREIGN PROFIT/NONPROFIT CORPORATION  
ECT.CON, INC.**

Certificate of Status	0
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**COVER LETTER**

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

**SUBJECT:** ECT.CON, 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:

GINA L. BINKLEY

Name of Person

LATHAM, SHUKER, EDEN & BEAUDINE, LLP

Firm/Company

111 N. MAGNOLIA AVENUE, SUITE 1400

Address

ORLANDO, FL 32801

City/State and Zip code

gbinkley@lseblaw.com

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

For further information concerning this matter, please call:

Gina L. Binkley

Name of Person

at ( 407 ) 481-5847

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. ECT.CON, 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. PENNSYLVANIA

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

3. 23-2927333

(FEI number, if applicable)

4. 10-7-1997

(Date of incorporation)

5. Perpetual

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

6. N/A

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

7. 115 Riverview Bend South, Unit 2144, Palm Coast, FL 32137

(Principal office address)

115 Riverview Bend South, Unit 2144, Palm Coast, FL 32137

(Current mailing address)

8. Engage in all aspects of environmental consulting or to engage in any lawful purpose.

(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: LSEB AGENT SERVICES, INC.

Office Address: 111 N. MAGNOLIA AVE., STE 1400

ORLANDO

(City)

, Florida 32801

(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.

[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

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Chairman: Terrie M. Baranek

Address: 115 Riverview Bend South, Unit 2144

Palm Coast, FL 32137

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

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

Director: Terrie M. Baranek

Address: 115 Riverview Bend South, Unit 2144

Palm Coast, FL 32137

Director: \_\_\_\_\_

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

B. OFFICERS

President: Terrie M. Baranek

Address: 115 Riverview Bend South, Unit 2144

Palm Coast, FL 32137

Vice President: \_\_\_\_\_

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

Secretary: Terrie M. Baranek

Address: 115 Riverview Bend South, Unit 2144, Palm Coast, FL 32137

Treasurer: Terrie M. Baranek

Address: 115 Riverview Bend South, Unit 2144, Palm Coast, FL 32137

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

13. 

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. Terrie M. Baranek

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

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COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
JUNE 27, 2012

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

**ECT,CON INC.**

is duly incorporated as a Pennsylvania Corporation under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

*Carol Aichele*

Secretary of the Commonwealth

Certification Number: 10409878-1

Verify this certificate online at <http://www.corporations.state.pa.us/corp/soskb/verify.asp>