

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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2mail	Address:			

FOREIGN PROFIT/NONPROFIT CORPORATION DET NORSKE VERITAS CERTIFICATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

13 OCT 31 PM 4: 23

Electronic Filing Menu

Corporate Filing Menu

Help

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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: DET NORSKE VERITAS CER	ETIFICATION, INC.		
	corporation - must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp "Carlificate of Existence," or "Cartificate of above referenced foreign corporation to transport to the corp of the corp	roration for Authorization to Transact Business in Florida," f Good Standing" and check are submitted to register the usact business in Plorida,		
Please return all correspondence concerning	g this matter to the following:		
Shari L. Gaubetz	<u>-</u>		
•	Name of Person		
DET NORSKE VERITAS CERTIFICATION,			
	Pirm/Company		
1400 Ravello Drive			
	Address		
Katy, TX 77449	,		
	City/State and Zip code		
theri.ganhatz@dav.com			
E-mail address: ((to be used for future annual report notification)		
For further information concerning this mat	tter, please call:		
Shari L. Gaubatz	, 281 396-1722		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: New Filing Section	MAILING ADDRESS: New Filing Section		
Division of Corporations	Division of Corporations		
Clifton Building P.O. Box 6327			
2661 Executive Center Circle Tallahassee, FL 32301	Talishassee, FL 32314		
Enclosed is a check for the following amou	unt:		
■ \$70.00 Filing Pee	Fee & 🗇 \$78.75 Filling Fee & 🖂 \$87.50 Filling Fee,		

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

13 OCT 31 PM 12: 55

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. DET NORSKE VERITAS CHRTIFICATION, 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) (State or country under the law of which it is incorporated) (FEI number, if applicable) 11/15/1994 Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Floride, if prior to registration) (SEB SECTIONS 607,1501 & 607,1502, F.S., to determine penalty liability) 1400 Ravello Drivo, Katy, TX 77449 (Principal office address) 1400 Revello Drive, Katy, TX 77449 (Current mailing address) management systems certification in various industries; safety training (Purpose(s) of corporation authorized in home state or country to be carried out in state of Plorida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pins Island Road Office Address: Plantation. 33324 (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.

> Howard L Volz Asst. Secretary nt'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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13 001 31 PM 12: 55

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Please see attached addendum
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Please see attached addendum
Address:
.
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may strain 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 folcony as provided for in s.817.155, P.S.
14. Gary Ciavola Secretary

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13 OCT 31 PH 12: 55

Addendum: Officer and Director Information Det Norske Varius Certification, Inc.

Officers:

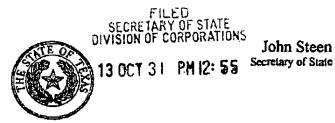
President: Faith Beaty 1400 Ravello Drive;Katy, Texas 77449, United States

Treasurer: Michael Dutzy 3675 Crestwood Pkwy, Suite 210 Duluth GA 30096, United States

Secretary: Gary Ciavola 67 South Bedford Street, Suite 201 East Burlington MA 01803-5108, United States

Directors:

Mauricio Venturin Address: 1400 Ravello Drivo, Katy, Texas 77449, United States Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for DET NORSKE VERITAS CERTIFICATION, INC. (file number 133316300), a Domestic For-Profit Corporation, was filed in this office on November 15, 1994.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 31, 2013.





John Steen Secretary of State