

| (Re | equestor's Name) | |
|-------------------------|---------------------|------|
| (Ad | ldress) | |
| (Ac | ldress) | |
| (Ci | ty/State/Zip/Phone | . #0 |
| (Ci | ty/State/Zip/Prione | :#) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nam | ne) |
| (Dc | cument Number) | |
| Certified Copies | · | |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | · |
| | | |
| | | |

Office Use Only



100257632011

03/11/14--01020--007 **78.75

STWISTON OF CORPORRATION

A AN

COVER LETTER

| TO: New Filing Section Division of Corporations |
|--|
| SUBJECT: NOVY 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: |
| William Jennings |
| Name of Person |
| NOVY Inc. |
| Firm/Company |
| 4070 Gilberts Ferry Road |
| Address |
| Ohatchee, AL 36271 |
| City/State and Zip code |
| william@novy-cad.net |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| William Jennings at 205 994-1015 |
| Name of Person Area Code & Daytime Telephone Number |
| |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations MAILING ADDRESS: New Filing Section Division of Corporations |
| Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 |
| Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: |
| ☐ \$70.00 Filing Fee |

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.

| | Corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.") | ," "COMPANY," "CORPORATION," | |
|--|---|--|--------------|
| | • | e adopted for the purpose of transacting business in Flori | da) |
| 2. Alabama | | 45-4965276 | |
| | under the law of which it is incorporated) | (FEI number, if applicable) | |
| _{4.} <u>3-26-201</u> | | _{s.} Perpetual | |
| (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual" | | d") | |
| _{7.} 4070 Gilb | (SEE SECTIONS 607.1501 & 607.16 erts Ferry Road, Ohatche (Principal office ad | | |
| 3693 Lov | orn Street, Hokes Bluff, AL | • | |
| | (Current mailing add | | |
| ·· | _ow Voltage Contracting | A harmind and in the of Chairds | 14 TAN |
| · • · | et address of Florida registered agent: (P. | | 7 = 9 |
| Name: | R. Jeffrey Boll, PA | | MH II: 32 |
| Office Address: | 14620 Perdido Key Driv | <u>e</u> | : 32 |
| | Pensacola | , Florida 32507 | , |
| | (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.

(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. Name's and business addresses of officers and/or directors: A. DIRECTORS Chairman: William Jennings Address: 4070 Gilberts Ferry Road Ohatchee, AL 36271 Vice Chairman: Address: Director: ___ **B. OFFICERS** President: William Jennings Address: 4070 Gilberts Ferry Road Ohatchee, AL 36271 Vice President: Address: _ Secretary: _ Address: 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. 14. William Jennings - President/CEO

Jim Bennett Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Jim Bennett, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

as appears on file and of record in this office, the pages hereto attached, contain a true, accurate, and literal copy of the Articles of Formation filed on behalf of NOVY Inc., as received and filed in the Office of the Secretary of State on 04/03/2012.



20140305000002032

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

03/05/2014

Date

di sum

Jim Bennett

Secretary of State