Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000126681 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: INCORP SERVICES INC

Account Number: I20120000007

: (702)866-2500

Fax Number : (702)866-2689

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

Email Address: Diana. Collinseincorp. com

FOREIGN PROFIT/NONPROFIT CORPORATION

American Scaffold Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

(((H14000126681 3)))

COVER LETTER

	orporations		
SUBJECT: Americ	an Scaffold Inc.		
		oration - must include suffix	
Dear Sir or Madam:			
"Certificate of Existen	ation by Foreign Corporatice," or "Certificate of Goign corporation to transact	on for Authorization to Transact Business in Florida," od Standing" and check are submitted to register the business in Florida.	
Please return all corre	spondence concerning this	matter to the following:	
	D	ana Collins	
	Na	me of Person	
_	InCorp	Services, Inc.	
	Fin	n/Company	
	2360 Corpor	ate Circle · Suite 400	
		Address	
	Henderso	n, NV 89074-7739	
		State and Zip code	
	docume	nts@incorp.com	
***************************************	E-mail address: (to be	used for future annual report notification)	
For further information	n concerning this matter, p	lease call:	
a Collins on behalf of	Incorp Services, Inc. at (702) 866-2500	•
Name of Perso	on	Area Code & Daytime Telephone Number	-
			<u>.</u>
STREET/COL	URIER ADDRESS:	MAILING ADDRESS:	<i>;</i>
New Filing Se		New Filing Section	,
Division of Co	rporations	Division of Corporations	
Clifton Buildir		P.O. Box 6327	,
Tallahassee, Fl	e Center Circle L 32301	Tallahassee, FL 32314 ω	,
Enclosed is a check for	the following amount:		
		☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee,	

(((H14000126681 3)))

APPLICATION BY YUKEIGN 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. American Sc	affold Inc.	•		
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	o," "Company," "Corporation,"		
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Flori	da)	
2. California		3. 522379015		
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)		
4. 08/19/2002	5	Perpetual		
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetua	<u>(")</u>	
6. Upon Registr	ration			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)		
7, 3210 Commercial St., San Diego, CA 92113				
	(Principal office ad	ldress)		
3210 Comme	rcial St., San Diego, CA 92113			
	(Current mailing ac	idress)		
g, . Industrial Se	ervices (Scaffolding and Containment	t)		
(Purpose(s	a) of corporation authorized in home state or	country to be carried out in state of Florida)	,	
9. Name and street	et address of Florida registered agent: (P	O. Box NOT acceptable)	WH 11	
Name:	InCorp Services, Inc.		· =	
Office Address:	17888 67th Court North		30 1	T
	Loxahatchee	, Florida 33470		
	(City)	(Zip code)		
	gent's acceptance: sed as registered agent and to accept ser	vice of process for the above stated corporation at	•	2

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.

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.

(((H14000126681 3)))

(((H14000126681 3)))

FILED

12. Names and business addresses of officers and/or directors:	14 HAY 30 PM 1:	
A. DIRECTORS	SECRETARY OF STAT	
Chairman:		
Address:		
Vice Chairman:		
Address:		
Director: Alvin McDonald Ruis, Jr.		
Address: 1500 North Fork Rd.		
Columbia Falls, MT 59912		
Director:		
Address:		
B. OFFICERS		
President: Alvin McDonald Ruis, Jr.		
Address: 1500 North Fork Rd.		
Columbia Fails, MT 59912		
Vice President:		
Address:	<u> </u>	
Scoretary:		
Address:		
Treasurer:	<u> </u>	
Address:		
NOTE: If necessary for may attach an addendum to the application listing add	itional officers and/or directors.	
Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 12 about are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.	ove) affirms that the facts stated herein not to the Department of State constitutes	
Abrin McDonold Bulg. In President	•	

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

06:43:09 a.m. % 05-30-2014

1111

(((H14000126681 3)))

State of California Secretary of State

CERTIFICATE OF STATUS

FILED

14 MAY 30 PM 1: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ENTITY NAME:

AMERICAN SCAFFOLD

FILE NUMBER:

FORMATION DATE:

TYPE:

08/19/2002 DOMESTIC CORPORATION

C2466982

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 28, 2014.

DEBRA BOWEN
Secretary of State

(((H14000126681 3)))