

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.

(((H14000175237 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:

Email Address:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone

Fax Number : (850)878-5368

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

5

# FOREIGN PROFIT/NONPROFIT CORPORATION

Stevenson & Palmer Engineering, Inc.

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

Electronic Filing Menu

Corporate Filing Menu

Help

# **COVER LETTER**

| TO: New Filing Section Division of Corporations                                                                                                                                      |                         |                                                                                                  |                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|--------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| SUBJECT: STEVENSON & PALMER EN                                                                                                                                                       | IGINEER <b>IN</b> G, IN | C.                                                                                               |                                                           |
|                                                                                                                                                                                      | corporation - m         | ust include suffix                                                                               |                                                           |
| Dear Sir or Madam:                                                                                                                                                                   |                         |                                                                                                  |                                                           |
| The enclosed "Application by Foreign Corp<br>"Certificate of Existence," or "Certificate of<br>above referenced foreign corporation to trans                                         | f Good Standing         | " and check are sul                                                                              |                                                           |
| Please return all correspondence concerning                                                                                                                                          | g this matter to t      | he following:                                                                                    |                                                           |
|                                                                                                                                                                                      | Name of Pers            | on                                                                                               |                                                           |
| C T Corporation System                                                                                                                                                               |                         |                                                                                                  |                                                           |
|                                                                                                                                                                                      | Firm/Compan             | ,                                                                                                |                                                           |
| 1200 South Pine Island Road                                                                                                                                                          |                         |                                                                                                  |                                                           |
| Plantation, FL. 33324                                                                                                                                                                | Address                 |                                                                                                  |                                                           |
| CT-statecommunications@wolterskluwer.com                                                                                                                                             | City/State and Z        | ip code                                                                                          |                                                           |
| E-mail address:                                                                                                                                                                      | to be used for f        | iture annual report                                                                              | notification)                                             |
| For further information concerning this mat                                                                                                                                          | ter, please call:       |                                                                                                  |                                                           |
| Angela Lamaruggine                                                                                                                                                                   | 855                     | 16-8944                                                                                          |                                                           |
| Name of Person                                                                                                                                                                       | Area Code               | & Daytime Teleph                                                                                 | one Number                                                |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount | nt:                     | MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |                                                           |
| S70.00 Filing Fee S78.75 Filing F                                                                                                                                                    | Fee & 🖪 \$7             | 8.75 Filing Fee &<br>nified Copy                                                                 | S87.50 Filing Fee, Certificate of Status & Certified Copy |

## 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.

|                                             | oration; must include "INCORPORATED,"<br>," "Inc," "Co," or "Corp.")                                                                                                      | "COMPANY,"                  | "CORPORATION,"              |                   |
|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------|-------------------|
| (If name unavailable                        | in Florida, enter alternate corporate name a                                                                                                                              | dopted for the p            | urpose of transacting bus   | iness in Florida) |
| Georgia                                     | 3.                                                                                                                                                                        |                             |                             |                   |
| (State or country us                        | nder the law of which it is incorporated)                                                                                                                                 | (FEI number, if applicable) |                             | ole)              |
| 11/14/1990                                  | 3.                                                                                                                                                                        | perpetual                   |                             |                   |
| (Date of                                    | incorporation)                                                                                                                                                            | (Duration: Year             | r corp. will cease to exist | or "perpetual")   |
|                                             | _                                                                                                                                                                         |                             |                             |                   |
|                                             | (Date first transacted business in<br>(SEE SECTIONS 607.1501 & 607.15                                                                                                     | Florida, if prior           | to registration)            | <u>-</u> -        |
|                                             |                                                                                                                                                                           |                             |                             |                   |
| 2430 Herodian Way,                          |                                                                                                                                                                           | os, 1 .a., w dose           |                             |                   |
| 2430 Herodian Way,                          | Suite 101 Smyrna GA 30080  (Principal office addr                                                                                                                         | <del>.</del>                |                             |                   |
|                                             | Suite 101 Smyrna GA 30080                                                                                                                                                 | <del>.</del>                |                             |                   |
|                                             | Suite 101 Smyrna GA 30080  (Principal office addr                                                                                                                         | css)                        |                             |                   |
| 2430 Herodian Way                           | Suite 101 Smyrna GA 30080  (Principal office addr., Suite 101 Smyrna GA 30080                                                                                             | ess)                        |                             |                   |
| 2430 Herodian Way  Name and street a        | Suite 101 Smyrna GA 30080  (Principal office addr., Suite 101 Smyrna GA 30080  (Current mailing addr.)                                                                    | ess)                        |                             | 下JUL 23 P         |
| 2430 Herodian Way                           | Suite 101 Smyrna GA 30080  (Principal office addr., Suite 101 Smyrna GA 30080  (Current malling addr., ddress of Florida registered agent: (P.C.)  C T Corporation System | ess)                        |                             | M JUL 23 PM       |
| 2430 Herodian Way  Name and street a        | Suite 101 Smyrna GA 30080  (Principal office addr., Suite 101 Smyrna GA 30080  (Current malling addr., ddress of Florida registered agent: (P.O.)                         | ess)                        |                             |                   |
| 2430 Herodian Way  Name and street a  Name: | Suite 101 Smyrna GA 30080  (Principal office addr., Suite 101 Smyrna GA 30080  (Current malling addr., ddress of Florida registered agent: (P.C.)  C T Corporation System | ess)                        |                             |                   |

duties, and I am familiar with and accept the obligations of my position as registered agent.

T Corporation System Jenifer Vincent (Registered agent's signature)

10. 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.

| 11. Names and business addresses of officers and/or directors:                                                                                                                                                                                                                    |            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| A. DIRECTORS                                                                                                                                                                                                                                                                      |            |
| Chairman: See Attachment of Directors and Officers                                                                                                                                                                                                                                |            |
| Address:                                                                                                                                                                                                                                                                          |            |
|                                                                                                                                                                                                                                                                                   |            |
| Vice Chairman:                                                                                                                                                                                                                                                                    |            |
| Address:                                                                                                                                                                                                                                                                          | -          |
|                                                                                                                                                                                                                                                                                   |            |
| Diagram                                                                                                                                                                                                                                                                           |            |
| Director:                                                                                                                                                                                                                                                                         | 動          |
| Address:                                                                                                                                                                                                                                                                          | <b>E</b>   |
|                                                                                                                                                                                                                                                                                   | <u> </u>   |
| Director:                                                                                                                                                                                                                                                                         |            |
| Address:                                                                                                                                                                                                                                                                          |            |
|                                                                                                                                                                                                                                                                                   |            |
| B. OFFICERS                                                                                                                                                                                                                                                                       | -2         |
| President: See Attachment of Directors and Officers                                                                                                                                                                                                                               |            |
| Address:                                                                                                                                                                                                                                                                          |            |
| Address.                                                                                                                                                                                                                                                                          |            |
|                                                                                                                                                                                                                                                                                   |            |
| Vice President:                                                                                                                                                                                                                                                                   |            |
| Address:                                                                                                                                                                                                                                                                          |            |
|                                                                                                                                                                                                                                                                                   |            |
| Secretary:                                                                                                                                                                                                                                                                        | , <u>.</u> |
| Address:                                                                                                                                                                                                                                                                          |            |
| Treasurer:                                                                                                                                                                                                                                                                        |            |
| Address:                                                                                                                                                                                                                                                                          |            |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or dire                                                                                                                                                                         |            |
|                                                                                                                                                                                                                                                                                   | ætors.     |
| Signature of Director or Officer                                                                                                                                                                                                                                                  |            |
| The officer or director signing this document (and who is listed in number 12 above) affirms that the facts are true and that he or she is aware that false information submitted in a document to the Department of Sta a third degree felony as provided for in s.817.155, F.S. |            |
| 13. President/CEO                                                                                                                                                                                                                                                                 | _          |
| (Typed or printed name and capacity of person signing application)                                                                                                                                                                                                                | ·          |

Directors:

Chairman:

Charles A. Welch

2430 Herodian Way, Suite 101

Smyrna, GA 30080

Vice Chairman:

William D. White 2946 Clearbrook Drive Marietta, GA 30068

Director:

Richard L. Clegg

723 Industrial Park Drive Ste 2

Evans, GA 30809

Director:

Ronny Dudley

1501 Highway 19 South Leesburg, GA 31763

Director:

Fred T. Finney

600 N. Jackson Street Albany, GA 31701

Officers:

President/CEO

Charles A. Welch

2430 Herodian Way, Suite 101

Smyrna, GA 30080

Vice President

Richard L. Clegg

723 Industrial Park Drive Ste 2

Evans, GA 30809

Vice President/ Treasurer

Ronny Dudley

1501 Highway 19 South Leesburg, GA 31763

Vice President

James C. Vaughn, Jr.

24 East Oglethorpe Avenue

Savannah, GA 31401

Secretary:

Alicia M. Mack

2430 Herodian Way, Suite 101

Smyrna, GA 30080

Assistant Secretary:

Robert E. Ramsey 1501 Highway 19 South Leesburg, GA 31763

## STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED: November 14, 1990

: K020924

JURISDICTION PRINT DATE

: Georgia

: July 23, 2014

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### STEVENSON & PALMER ENGINEERING, INC. A Domestic For-Profit Corporation

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. 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.

B: 1.h-Brian P. Kemp Secretary of State

Tracking #: xSneyDF1