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COVER LETTER

TO:	Registration Section			
	Division of Corporations			
CHD	Barringer Rail Safety Group,	Inc.		
SUBJ	JECT:Name	of corporation	- must include suffix	
Dear S	Sir or Madam:			
"Certi above	ficate of Existence," or "Certificate referenced foreign corporation to t	e of Good Stand ransact busines		
	ereturn all correspondence concern m Barringer	ing this matter	to the following:	
Barrin	ger Rail Safety Group, Inc.	Name of P	erson	
9636 F	Firenze Drive	Firm/Comp	pany	
Naples	s, FL 34113	Addres	SS	
willian	n.baringer@icloud.com	City/State an	d Zip code	
	E-mail address	s: (to be used fo	or future annual report notification)	
For fu	rther information concerning this n	natter, please ca	ılı:	
Sandra Englund		703	304-1204	
	Name of Person	Area Code	Daytime Telephone Number	
	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclos	sed is a check for the following amo	ount:		
5 70	0.00 Filing Fee \$78.75 Filin Certificate of		\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy 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. Barringer Rail Safety Group, Inc. 1. (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) Georgia 46-5310235 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 9636 Firenze Drive Naples, FL 34113 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) William Barringer Name: 9636 Firenze Drive Office Address: Naples , Florida

9. 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.

W. L. Barringer
(Registered agent's signature)

(City)

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:

	ECTORS Susan Barringer		
	9636 Firenze Drive Naples, FL 34113		
Address:		, creation of the second second	
Vice Cha			
Address:	9636 Firenze Drive Naples, FL 34113		
Director:	N/A		
Address:		8 ()	
Director:	N/A	2015 SEP SECRETA	
Address:		SSR .	
B. OFF	Susan Barringer	A ID: 25 FISTATE FLORIDA	
	9636 Firenze Drives Naples, FL 34113		
Vice Pres	N/A ident:		
Address:			
	William Barringer 29636 Firenze Drive Naples, FL 34113		
Address: Treasurei	Susan Barringer	· · · · · · · · · · · · · · · · · · ·	
Address:	9636 Firenze Drive Naples, FL 34113		
NOTE:	If necessary, you may attach an addendum to the application listing additional office W. L. Sarringe. Signature of Director or Officer	ers and/or directors	.
The officer	cer or director signing this document (and who is listed in number 11 above) affirms and that he or she is aware that false information submitted in a document to the Depergree felony as provided for in s.817.155, F.S.	artment of State co	
13	W: 11 IAM BARRINGER SECRETAR	<i>y</i>	

Control Number: 14034788

STATE OF GEORGIA

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

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

BARRINGER RAIL SAFETY GROUP, INC.

a Domestic Profit Corporation

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

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

: 12145376 : 04/02/2014 : Georgia : 8/28/2015 : 211



Brian P. Kemp Secretary of State