

FILED 000002134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

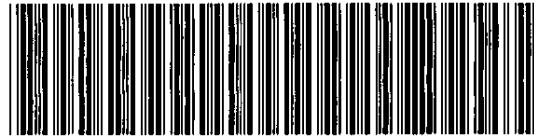
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2016 MAY 10 A 9:21

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RECEIVED  
DEPARTMENT OF STATE  
16 MAY 10 AM 10:49

MAY 11 2016

SMITHSON

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 134840 7467927

AUTHORIZATION



COST LIMIT : \$ 87.50

ORDER DATE : May 9, 2016

ORDER TIME : 5:41 PM

ORDER NO. : 134840-005

CUSTOMER NO: 7467927

FOREIGN FILINGS

NAME: POWER A/E CONSULTING, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

POWER A/E Consulting, Inc.

**SUBJECT:** \_\_\_\_\_  
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:

Tonya Goitiandia

\_\_\_\_\_  
Name of Person

POWER Engineers, Inc.

\_\_\_\_\_  
Firm/Company

PO Box 1066

\_\_\_\_\_  
Address

Hailey, ID 83333

\_\_\_\_\_  
City/State and Zip code

tgoitiandia@powereng.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tonya Goitiandia

208

788-3456

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☒ \$87.50 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.*

POWER A/E Consulting, Inc.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

POWER Architects Consulting, Inc.

\_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Illinois 3. 47-5450066  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/9/2015 5. Perpetual  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3940 Glenbrook Drive, Hailey, ID 83333  
(Principal office address)

PO Box 1066, Hailey, ID 83333  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

**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.*

Corporation Service Company

By: \_\_\_\_\_

(Registered agent's signature)

Melissa Zender  
Asst. Vice President

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.

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MAY 10 A 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: William Hansen  
12755 Olive Blvd., Suite 100  
Address: St. Louis, MO 63141

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: Michael Porter  
2041 S. Cobalt Point Way  
Address: Meridian, ID 83642

Director: James Haynes  
2041 S. Cobalt Point Way  
Address: Meridian, ID 83642

**B. OFFICERS**

President: William Hansen  
12755 Olive Blvd., Suite 100  
Address: St. Louis, MO 63141

Vice President: Michael Porter  
2041 S. Cobalt Point Way  
Address: Meridian, ID 83642

Secretary: Barry Neiwert  
3940 Glenbrook Drive, Hailey, ID 83333  
Address: \_\_\_\_\_

Treasurer: Janis James  
3940 Glenbrook Drive, Hailey, ID 83333  
Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. James, Treasurer  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Janis James, Treasurer  
(Typed or printed name and capacity of person signing application)

FILED  
2010 MAY 10 A 9 21  
CLERK OF STATE  
TREASURY FLORIDA

**POWER A/E CONSULTING, INC.**  
**List of Officers & Directors**

<b>Name</b>	<b>Title</b>	<b>Business Address</b>
William Hansen*	President / Chairman of Board	12755 Olive Blvd. Suite 100 St. Louis, MO 63141
James Haynes*	Vice President	2041 South Cobalt Point Way Meridian, ID 83642
Michael Porter*	Vice President	2041 South Cobalt Point Way Meridian, ID 83642
Barry Neiwert	Secretary	3940 Glenbrook Drive Hailey, ID 83333
Janis James	Treasurer	3940 Glenbrook Drive Hailey, ID 83333

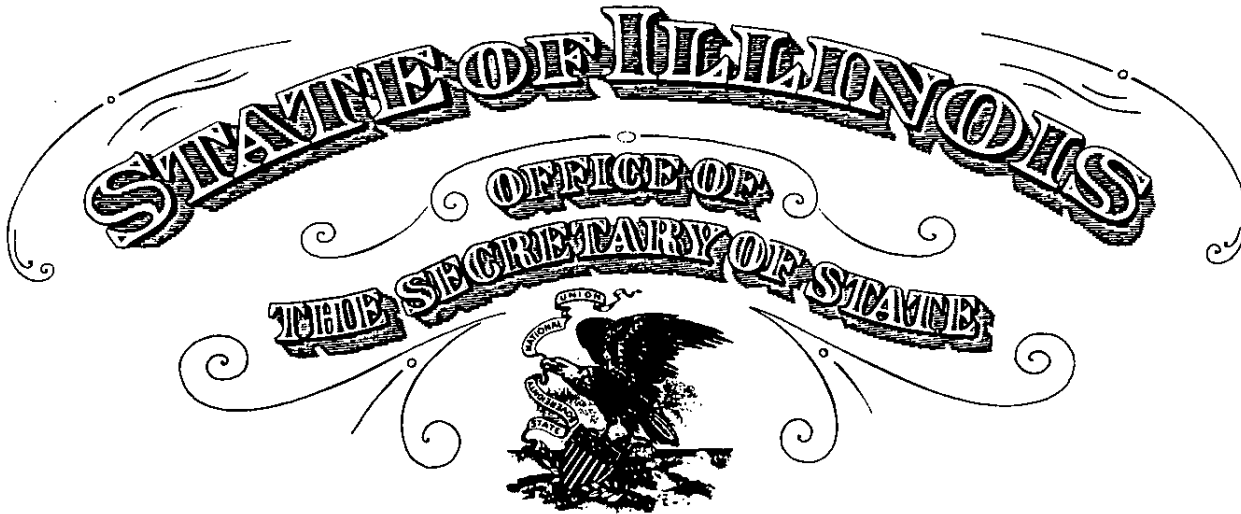
\*Directors

Date of Incorporation: 10/05/2015  
Federal Tax I.D. #: 47-5450066

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2016 MAY 10 A 9:21  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

File Number

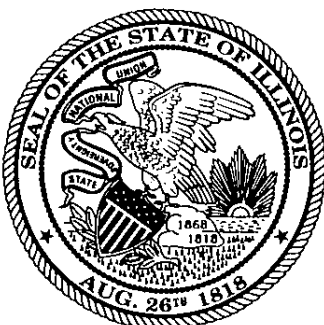
7029-262-9



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

POWER A/E CONSULTING, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 09, 2015, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



**In Testimony Whereof, I hereto set**  
*my hand and cause to be affixed the Great Seal of*  
*the State of Illinois, this 9TH*  
*day of MAY A.D. 2016 .*

*Jesse White*

SECRETARY OF STATE