F1600000 3068

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL		
(В	usiness Entity Name))		
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				

Office Use Only



000285883580

05/17/16--01017--003 **78.75





FLORIDA DEPARTMENT OF STATE Division of Corporations

May 19, 2016

DONALD STEIN 9 MORGANTON INDUSTRIAL MORGANTON, GA 30560

SUBJECT: DOUBLE S MECHANICAL INC.

Ref. Number: W16000036355

We have received your document for DOUBLE S MECHANICAL INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

Letter Number: 916A00010645

COVER LETTER

O: Registration Section Division of Corporations						
SUBJECT: Double S Mechanical Inc.						
Name of corporation - must include suffix						
Dear Sir or Madam:						
The enclosed "Application by Foreign Corporation fo "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact busing	anding" and check are submitted to register the					
Please return all correspondence concerning this matter	er to the following:					
Donald Stein						
	Name of Person					
Double S Mechanical Inc.						
Firm/Co. 9 Morganton Industrial	mpany					
Add	ress					
Morganton, GA 30560						
City/State	and Zip code					
lynz1303@yahoo.com						
E-mail address: (to be used	for future annual report notification)					
For further information concerning this matter, please	call:					
Donald Stein 904	759-2304					
Name of Person Area Co	de 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 & □ \$87.50 Filing Fee, 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.

`	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	
Georgia	3.		
(State or country under the law of which it is incorporated 10/06/2015		(FEI number, if applicable)	
(Date of incorporation)		(Date of duration, if other than perpetual)	
Morganton, GA	•	pal office address)	
Morganton, GA	30560		
	(Current mailir	ng address, if different)	
Name and stree	et address of Florida registered agent: (P.C	O. Box NOT acceptable)	
Name:	Donald W Stein	16 1 6	
	1211 Fruit Cove Ter. North		
ffice Address:	St. Johns	, Florida 32259	
ffice Address:	Ov. Johns	(7in anda)	
ffice Address:	(City)	(Zip code)	
Registered ag	(City)	ice of process for the above stated corporation at the p	

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.

(Registered agent's signature)

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

A. DIRI	ECTORS	
Chairman	:	
Address:		
Vice Chai	rman:	
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFF	CERS	200
President:	Donald Stein	
Address:	1211 Fruit Cove Ter. North	
_	St. Johns, FL 32259	
Vice Presi	James Sadler	C : 1
Address:	250 Crestlawn Dr.	5 S
_	Copperhill, TN 37317	
Secretary:	Lyndsay Sadler	
Address:	250 Crestlawn Dr., Copperhill, TN 37317	
Treasurer:	Teresa Stein	
Address:	1211 Fruit Cove Ter. North, St. Johns, FL 32259	
NOTE:	If necessary, you may attach an adelendum to the application listing additional officer	s and/or directors.
12.	Donal as Stein	
The office are true a a third de	Signature of Director or Officer ter or director signing this document (and who is listed in number 11 above) affirms that the or she is aware that false information submitted in a document to the Department of	nat the facts stated herein rtment of State constitutes
13	DONALD W STEIN PRES.	

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

ز

Control Number: 15097744

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

Double S Mechanical 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

r : 13186313 Filed : 10/06/2015 : Georgia

Print Date Form Number :05/27/2016



Brian P. Kemp Secretary of State