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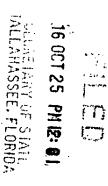
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Special Instructions to Filing Officer:					





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COVER LETTER

TO:		tration Se ion of Co	ction rporations				
SUBJ			N CONSULTING	ENGINEER	S, II	NC.	
SU DU	EC1;		Name	of corporati	on	- must include suffix	
Dear S	ir or M	adam:					
"Certif	icate of	Existenc	tion by Foreign (e," or "Certifica on corporation to	te of Good S	tano	Authorization to Transac ding" and check are subrus in Florida.	t Business in Florida," nitted to register the
	return a Y ORM		pondence concer	ning th is mat	ter	to the following:	
				Name	of P	erson	
CARL	SON CC	NSULTI	NG ENGINEERS,	INC.			
7069 1	DIVER	TONE CO	OMMONS	Firm/Co	əmţ	pany	
7000 £			MIMON3				
BARTI	LETT, T	N 38133		Ad	dres	SS	
	· · · · ·			City/State	an	d Zip code	
CORE	YORMA	N@CAR	LSONCONSULT				
			E-mail addre	ss: (to be use	d fo	or future annual report no	otification)
For fur	ther inf	ormation	concerning this	matter, pleas	e ca	all:	
CORE	Y ORM	AN		901 _ at (384-0404	
	Name	of Perso	n	Area C	ode	Daytime Teleph	one Number
	Regist Divisi Cliftor 2661 I	tration Se on of Co n Buildin	porations g : Center Circle	SS:		MAILING AE Registration Se Division of Cor P.O. Box 6327 Tallahassee, FI	ction porations
Enclos	ed is a c	check for	the following an	nount:			
□ \$ 70	.00 Fili	ng Fee	□ \$78.75 Fili Certificate	_		\$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.

1.	CARLSON CONSULTING ENGINEERS, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")								
	•	able in Florida, enter alternate corpor	rate name ado	pted for the purpose of transacting 62-1747732	business in Florida)				
2.	(State or country under the law of which it is in 08/11/1998 (Date of incorporation)			(FEI number, if appl					
4,			5	(Date of duration, if other th	an perpetual)				
7		DRIVE BARTLETT, TN 38133 ONE COMMONS BARLTETT,	(Principal o	F.S., to determine penalty liability					
8.	Name and stree	(Cur <u>et address</u> of Florida registered ag	-	ddress, if different) BOX NOT acceptable)	ÎG OCT ; ALLAHA				
	Name:	C T Corporation System		···	25. F	- J			
Of	ffice Address:	1200 South Pine Island Road Plantation			F 100 P 100	11;			
		(City)		, Florida	IDA				
Ho de fu	aving been nam signated in this rther agree to co	ent's acceptance: sed as registered agent and to accept the application, I hereby accept the omply with the provisions of all amiliar with and accept the obli	appointmen statutes rela	it as registered agent and agree tive to the proper and complete y position as registered agent.	e to act in this capacit				
		(R	legistered ager	nt'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: Vice Chairman: ___ Address: __ Address: Director: **B. OFFICERS** DEAN L. CARLSON President: **4035 HADLEY DRIVE** Address: BARTLETT, TN 38133 JOSEPH PARSLEY Vice President: 10212 HERONS POINTE Address: LAKELAND, TN 38002 KATHY CARLSON Secretary: 4035 HADLEY DRIVE Address: KATHY CARLSON Treasurer: 4035 HADLEY DRIVE Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. DEAN L. CARLSON- PRESIDENT

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



STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

CARLSON CONSULTING ENGINEERS, INC.

October 11, 2016

ATTN: COREY ORMAN 7068 LEDGESTONE CMNS BARTLETT, TN 38133-3871

Request Type: Certificate of Existence/Authorization

Issuance Date: 10/11/2016

Request #:

0216733

Copies Requested:

Document Receipt

Receipt #: 002923863

Filing Fee:

\$20.00

Payment-Check/MO - CARLSON CONSULTING ENGINEERS, INC., BARTLETT, TN

\$20.00

Regarding:

CARLSON CONSULTING ENGINEERS, INC.

Filing Type:

For-profit Corporation - Domestic

Control #:

355643

Formation/Qualification Date: 08/10/1998

Date Formed:

08/10/1998

Status:

Active

Formation Locale: TENNESSEE

Duration Term:

Perpetual

Inactive Date:

Business County: SHELBY COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

CARLSON CONSULTING ENGINEERS, INC.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Sheila Keeling

Verification #: 019403429