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COVER LETTER

TO: Registration Section Division of Corporations				
All Systems, Inc.				
SUBJECT:	<u> </u>	. 1 1 00		
Name	of corporation	- must include suffix		
Dear Sir or Madam:				
	te of Good Stand	Authorization to Transact Business in Florida," ding" and check are submitted to register the s in Florida.		
Please return all correspondence concern Alexandria Sorrells	ning this matter	to the following:		
	Name of F	erson		
All Systems, Inc.				
	Firm/Comp	nanv		
P.O. Box 287	i iiii Com	oun,		
	A 11			
Cumming, GA 30028	Addre	SS		
	City/State an	d Zip code		
alex@asihvac.net				
E-mail addre	ss: (to be used for	or future annual report notification)		
For further information concerning this	matter, please ca	all:		
Alexandria Sorrells	770	886-9903		
	_ 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 ar	nount:			
■ \$70,00 Filing Fee □ \$78.75 Fili Certificate	•	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status of 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.

All Systems Inc.

All Systems, Inc.					
		"COMPAN	Y," "CORPORATION	,,	
All Systems of G	eorgia, Inc.				
(If name unavailab	•	-	• •	g business in Florida)	
Georgia					
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)			
	5.				
(Date of incorporation)		(D	(Date of duration, if other than perpetual)		
	rive, Cumming, GA 30028 (Principal)				
					
	(Current mailing	g address, if	different)	Time _	
Name and street	address of Florida registered agent: (P.O). Box <u>NO</u>	<u>Γ</u> acceptable)	S OEC	
Name:	REGISTERED AGENTS INC.				
ffice Address:	3030 N. Rocky Point Drive, STE 1	50A		PH 3: FED	
	TAMPA	. Flori	_{ida} 33607	** %	
	(City)	, - 101	(Zip code)	٠٠٠٠ حر	
	(Enter name of cor "Inc.," "Co.," "Cor." All Systems of Good (If name unavailability Georgia (State or country 12/18/1980 (Date of Cor.) P.O. Box 287, Cur. Name and street Name:	(Enter name of corporation; must include "INCORPORATED," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") All Systems of Georgia, Inc. (If name unavailable in Florida, enter alternate corporate name a Georgia (State or country under the law of which it is incorporated) 12/18/1980 (Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 2630 Business Drive, Cumming, GA 30028 (Princip P.O. Box 287, Cumming, GA 30028 (Current mailin Name and street address of Florida registered agent: (P.C. Name: REGISTERED AGENTS INC. 3030 N. Rocky Point Drive, STE 1 TAMPA	(Enter name of corporation; must include "INCORPORATED," "COMPAN" Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") All Systems of Georgia, Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the Georgia 58-141969 3. (State or country under the law of which it is incorporated) 12/18/1980 5. (Date first transacted business in Florida, if proceedings (SEE SECTIONS 607.1501 & 607.1502, F.S., to compare the second of the Georgia (Principal office add P.O. Box 287, Cumming, GA 30028 (Current mailing address, if Name and street address of Florida registered agent: (P.O. Box NO) Name: REGISTERED AGENTS INC. 3030 N. Rocky Point Drive, STE 150A TAMPA, Florida Tampa Address:	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION" Inc.," "Co.," "Corp.," "Inc," "Co," or "Corp.") All Systems of Georgia, Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting Georgia [State or country under the law of which it is incorporated) [Oate of incorporation] (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability of the purpose of transacting Security (Principal office address) P.O. Box 287, Cumming, GA 30028 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: REGISTERED AGENTS INC. 3030 N. Rocky Point Drive, STE 150A TAMPA Florida 33607	

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.

Bill Havre/Secretary/Registered Agents Inc.

(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: Address: Vice Chairman: Address: _ Alexandria Sorrells Director: P.O. Box 287 Address: Cumming, GA 30028 Casey Johnson Director: P.O. Box 287 Address: Cumming, GA 30028 **B. OFFICERS** Address: Vice President: Address: Secretary: ___ Address: Treasurer: Address: NOTE If necessary, yopenny 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.

Control Number: J013352

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

ALL SYSTEMS, 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

13749238 12/18/980 12/18/980 12/19/206 12/19/206 13/19/2



Brian P. Kemp Secretary of State