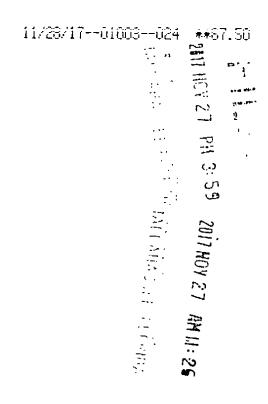
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(Re	questor's Name)		
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(Ad	dress)		
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(Cit	y/State/Zip/Phone	#)	
PICK-UP	MAIT	MAIL	
(Pu	siness Entity Nam	<u>a)</u>	
(Du	Silless Ellity Nam	e)	
(Do	ocument Number)		
Certified Copies	Certificates of Status		
Special Instructions to	Filing Officer:		

Office Use Only



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HOV 2.0 2017 J. HARRIS

COVER LETTER

Division of Corporations	
Name of corporation - must include suffix	d
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:	
Scott Summer	
Name of Person	
Thomason Flectric Company of Glynn Inc	
Thompson Flectric Company of Glynn, Inc. Firm/Company	_
270 Rose Dr. Address	_
Address	
Brunswick, GA. 31520	
City/State and Zip code	
Scall SS moor & house the not	
Scott 55umner 6 bell south. Net E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Scott Summer at (912) 717-1320	
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 & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy	us &

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.

ì.	Thompson Flectric Company of (Enter name of corporation; must include "INCORPORATED,"		ted	
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")			
	(If name unavailable in Florida, enter alternate corporate name ad-	• • • • • • • • • • • • • • • • • • • •		ia)
2.	Georaja 3.	a 3. 58 - 168 1635 or the law of which it is incorporated) (FEI number, if applicable)		
	(State or country under the law of which it is incorporated)			
4.	6-5-1986 5.			
	<u>6-5-1986</u> 5	(Date of duration, if other than	n perpetual)	
6.	N/A			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		•	
		• • •		
7.	270 Rose Dr. Brunswice (Principal	K, 6A, 31520		
	(Ртпсіра)	office address)		
	(Current mailine	address, if different)		
	(Curea naming	address, if different)		
8.	Name and street address of Florida registered agent: (P.O.	Box NOT acceptable)	: .	20
	Name: URS Agents, LLC		:	2 A O H U I
~	• • • •		: :• ,	
UI	fice Address: 3450 Lake Shore [- -	,	7 :
	<u>Tallahassee</u> (City)	, Florida <u>32312</u>	• • •	: : : : : : : : : : : : : : : : : : :
	(City)	(Zip code)	•	လ္
9	Registered agent's acceptance:			CAT CAT
	wing been named as registered agent and to accept service	of process for the above stated c	ornoration at	ihe place
ac	signated in this application, I hereby accept the appointme ther agree to comply with the provisions of all statutes rel	nt as registered agent and agree	to act in this c	anacity. I
du	ties, and I am familiar with and accept the obligations of n	ny position as registered agent	verjormance (oj my
	URS Agents, LLC On: har & Christian Eub.			
	Sy: has r Christian Eub	anks, Assistant Secretary		
	(Registered age			

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:			
Director:			
Address:			
			_
Director:			
Address:			
B. OFFICERS		_	
President: Ronald Bethune CEO			
Address: P.O. Box 346			
Darien, GA 31305	<u> </u>	2517	
Vice President: Scott Summer CFO	<u> </u>	HO:	RICTA AL
Address: 1255 White fail Dr.	1 <u> </u>	27	<u> </u>
Hortense, GA. 31543	••	7 0 341	•
Secretary: Ropald Bethune		ί	
Address: P.O. Box 346 Darien, GA. 31305		U.	
Treasurer:		_	•
Address:	· · · · · ·		
NOTE: If necessary, you may attach an addendum to the application listing additional officers an	d/or direc	tors.	
12. Sommer			
Signature of Director or Officer	- -		
The officer or director signing this document (and who is listed in number 11 above) affirms that t are true and that he or she is aware that false information submitted in a document to the Department of the D			
a third degree felony as provided for in s.817.155, F.S.			
13. Scott Summer Vice President/CFO (Typed or printed name and capacity of person signing application)	 		
(-) printed mand and capacity of person signing application)			

Control Number: J608855

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

1, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

THOMPSON ELECTRIC COMPANY OF GLYNN, 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 : 14965428 Date Inc/Auth/Filed: 06/05/1986 Jurisdiction : Georgia Print Date 11/20/2017

Form Number : 211



Brian P. Kemp Secretary of State