# F17000005721

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STAIR

K. SALY DEC 21 2017

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: IET Security and Automation, Inc.	
Name of corporation -	must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Stand above referenced foreign corporation to transact business	ing" and check are submitted to register the
Please return all correspondence concerning this matter t	o the following:
KENDRA STEWART	
Name of Pe	erson
IET Security and Automation, Inc.	
Firm/Comp	any
4324 MIDMOST DRIVE	
Addres	s
MOBILE, AL 36609	
City/State and	d Zip code
KSTEWART@IETCOMPANIES.COM	
E-mail address: (to be used fo	r future annual report notification)
For further information concerning this matter, please ca	11:
KENDRA STEWART at ( 251	338-1739
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 & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

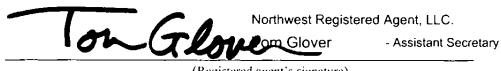
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. IET Security and	d Automation, Inc.	<u> </u>	
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION	1,**
IET Security and	Automation, Inc.		
(If name unavaila	able in Florida, enter alternate corporate name a	dopted for the purpose of transactin	g business in Florida)
) Louisiana	3.	47-3902058	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
1 05-04-2015	5.		
·	of incorporation)	(Date of duration, if other than perpetual)	
<b>5</b> .			
- 4224 MIDMOST I	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		ty)
7. 4324 WILDIVIOST	ORIVE MOBILE, AL 36609 (Principal	al office address)	
	(Current mailing	g address, if different)	
3. Name and stree	et address of Florida registered agent: (P.O	. Box <u>NOT</u> acceptable)	2017 DEC 18 SLORE JAR
Name:	Northwest Registered Agent, LLC.		
Office Address:	3030 N. Rocky Point Dr. STE 150A	· 	(m)
	Tampa	, Florida 33607	
	(City)	(Zip code)	STATE STATE
. <b>.</b>			(a) (b) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d

### 9. Registered agent's acceptance:

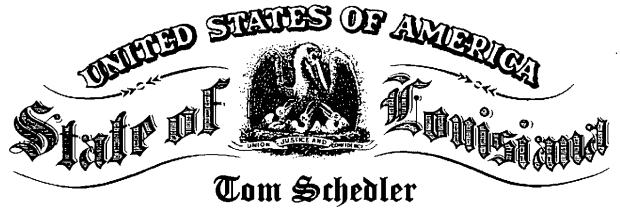
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(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: \_\_\_ Vice Chairman: Address: \_\_\_\_\_ Director: \_\_\_ Address: Address: \_\_\_\_\_ **B. OFFICERS** President; DONALD H. GANTT JR. Address: 4324 MIDMOST DRIVE **MOBILE, AL 36609** Vice President: Secretary: Address: \_\_\_\_ 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. 13 DONALD H. GANTT JR.



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

### IET SECURITY AND AUTOMATION, INC.

A corporation domiciled in COVINGTON, LOUISIANA,

Filed charter and qualified to do business in this State on May 04, 2015,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

November 30, 2017

Certificate ID: 10892931#XMJ62

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Secretary of State
Web 41874518D



November 17, 2017

KENDRA STEWART IET SECURITY AND AUTOMATION, INC. 4324 MIDMOST DR. MOBILE, AL 36609

SUBJECT: IET SECURTIY AND AUTOMATION, INC.

Ref. Number: W17000092154

We have received your document for IET SECURTIY AND AUTOMATION, INC. and your check(s) totaling \$87.50. 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 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.

Letter Number: 117A00023436

Karen A Saly Regulatory Specialist II

www.sunbiz.org

District of Constructions D.O. DOV COOT (D.D.)