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(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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Certified Copies Certificates of Status						
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Special Instructions to Filing Officer:						
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Office Use Only



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COVER LETTER

TO:	Registration Sec	tion					
Division of Corporations							
CUDI		ELECTRICAL SERVIC	E. INC.				
SUBJ	ECT:	Name of cor	rnoration -	must include suffix			
		rume of con	portunon	must menude surrix			
Dear S	Sir or Madam:						
"Certi	ficate of Existence		lood Stand	ing" and check are su	act Business in Florida," bmitted to register the		
	return all correspo S DAVIS	ondence concerning th	is matter t	o the following:			
			Name of Pe	erson	, , , , , , , , , , , , , , , , , , , 		
IST U	NITED CRS, LLC						
		<u></u>	irm/Comp	anv			
4211 C	CAPITAL CIRCLE		n nir comp	arry			
			A 11		<u> </u>		
TALL	AHASSEE, FL 3230	3	Addres	S			
		Cit	y/State and	l Zip code			
cc@un	iteders.com						
		E-mail address: (to	be used fo	r future annual report	notification)		
For fu	rther information o	oncerning this matter.	, please ca	II:			
JAMES DAVIS			50	322-7117			
)			
	Name of Person	Λ	Area Code	Daytime Telep	phone 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			
Enclos	sed is a check for t	he following amount:					
3 \$70	0.00 Filing Fee	☐ \$78.75 Filing Fee Certificate of Sta		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1.					
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	"COMPANY,"	" "CORPORATION.	."	
TRINITY ELEC	CTRICAL SERVICES OF GEORGIA, INC.				
(If name unavail;	able in Florida, enter alternate corporate name	adopted for the p	ourpose of transacting	g business in Florida)	
GA		26-1352455			
2	y under the law of which it is incorporated)	·			
11/02/2007		PERPETUAL	AL		
UPON REGIST	of incorporation) RATION	(Date of duration, if other than perpetual)			
	(SEE SECTIONS 607.1501 & 607. IVE. BAXLEY, GA 31513	1502, F.S., to dete		y)	
91 MIMOSA DR	IVE, BAXLEY, GA 31513	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•		
	(Current mail	ing address, if diff	ferent)	1999	
	et address of Florida registered agent: (P IST UNITED CRS, LLC	O. Box <u>NOT</u> a	cceptable)	POR MAY -9 T	
Name:	4211 CAPITAL CIRCLE NW				
Office Address:	4211 CAPITAL CIRCLE INW				
	TALLAHASSEE		32303	2: 49 STATE 1 2007	
	(City)		(Zin code)		

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: Address: ___ Vice Chairman: Address: Address: ____ Director: B. OFFICERS WILLIAM CHAD HUTCHINSON President: 91 MIMOSA DRIVE Address: BAXLEY, GA 31513 Vice President: Address: _____ Secretary: Address: Address: _____ NOTE: M 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. WILLIAM CHAD HUTCHINSON 13. _____

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

Control Number: 07096154

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

TRINITY ELECTRICAL SERVICES, 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 : 15782346 Date Inc/Auth/Filed: 11/02/2007 Jurisdiction : Georgia Print Date : 05/09/2018

Form Number : 211



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