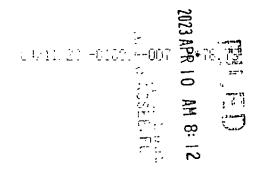
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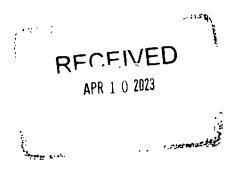
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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S. FRICK 11 11 APR 24 21 3

COVER LETTER

	tration Section ion of Corporations				
SUBJECT:	HOLMES AUTOMATION (COMPONENTS.	, INC		
JOBSEC 1.		of corporation -	- must include suffix		
Dear Sir or M	adam:				
"Certificate o		of Good Stand	authorization to Transact Busine ing" and check are submitted to s in Florida.	o register the	!
Please return	all correspondence concerni	ng this matter t	to the following:	ڍ'	2023 APR 10 AM 8: 12
GREGORY A	. HOLMES				APR
		Name of P	erson	<i></i>	
HOLMES AU	TOMATION COMPONENTS	, INC		\$20 100 100	2
		Firm/Comp	pany	ارس) * ريسا	<u>~</u>
660 SE LAKE	VIEW DR			7	2
		Addres	SS		
KEYSTONE I	HEIGHTS, FL 32656				
		City/State and	d Zip code		
HOLMESGA7	729@GMAIL.COM		A		
	E-mail address	: (to be used fo	r future annual report notificati	on)	
For further in	formation concerning this m	atter, please ca	11:		
GREGORY A	. HOLMES	at (336	671-6366		
Nam	e of Person	Area Code	Daytime Telephone Nu	mber	
Regis Divis The C 2415	EET/COURIER ADDRES stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		MAILING ADDRES Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32316	ons	
	check for the following amorek payable to: FLORIDA Ding Fee S78.75 Filin Certificate of	EPARTMENT (g Fce & □	\$78.75 Filing Fee & ☐ \$8 Certified Copy Ce	37.50 Filing lertificate of ertified Copy	Status &

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.

L. HOLMES AU	HOLMES AUTOMATION COMPONENTS, INC						
	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp,")	"COMPANY," "CORPORATION,"	.,				
(If name unava	ilable in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)				
NORTH CAROLINA		56-1958280					
(State or coun	(State or country under the law of which it is incorporated) (FEI number, if applicable						
4. 01-26-1996	5.						
(Date of incorporation)		(Date of duration, if other than perpetual)					
6.							
	(Date first transacted business in	Florida, if prior to registration) i02, F.S., to determine penalty liability	<u> </u>				
660 SE LAKEV	(SEE SECTIONS 607.1301 & 607.13 TIEW DR, KEYSTONE HEIGHTS, FL 32656	102, r.s., to determine penalty hability	")				
7		ce <u>street</u> address)					
	(ттерагоп	ce <u>street</u> address)	21				
	(Current mailin	g address, if different)	023 A				
8. Name and stre	eet address of Florida registered agent: (P.C). Box NOT acceptable)	2028 APR 1 0				
Name:	GREGORY A. HOLMES						
Office Address:	660 SE LAKEVIEW DR	••	8: 12 단위:				
	KEYSTONE HEIGHTS.	, Florida 32656	p. 10				
	(City)	(Zip 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.

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.

A. DIRECTORS GREGORY A. HOLMES Name: ______ □Chairman □ Chairman 660 SE LAKEVIEW DR Address: Address: __________ ☐ Vice Chairman □ Vice Chairman KEYSTONE HEIGHTS, FL 32656 □ Director □Director President □ President □Vice President □ Vice President □Treasurer □Treasurer □ Secretary □ Secretary □Other _____ □Other _____ □Other _____ □Other _____ Name: Chairman □ Chairman Name: □Vice Chairman Address: □ Vice Chairman Address: _____ □Director □Director □President □President □Vice President __ □Vice President □ Secretary ☐Treasurer □ Secretary ☐Treasurer □Other _____ □Other □Other ____ □ Chairman □ Chairman Name: Name: □Vice Chairman Address: ______ □Vice Chairman Address: ____ □Director □Director □ President □President □ Vice President □ Vice President □ Secretary □Treasurer □ Secretary □Treasurer □ Other _____ □Other _____ □Other _____ Other ____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Cmer 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. GREGORY A. HOLMES, PRESIDENT



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

HOLMES AUTOMATION COMPONENTS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 26th day of January, 1996, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 20th day of February, 2023.

Elaine J. Marshall

Secretary of State