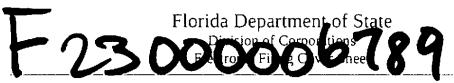
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230004162093)))



H230004162093AB0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION FET CONSTRUCTION INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

C -6 PH 6: 53

Electronic Filing Menu

Corporate Filing Menu

Help

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.

FET CONSTRU	CTION INC			
(Enter name of c	orporation: must include "INCORPORATED," "orp," "Inc," "Co." or "Corp.")	COMPANY," "CORPORATION OF THE COMPANY,"	ON,"	-
(If name unavail	able in Florida, enter alternate corporate name add	pted for the purpose of transact	ting business in Florida)	-
Massachusetts	3.			
(State or countr 09/12/1985	y under the law of which it is incorporated) 5			-
(Date	of incorporation) 5.		er than perpetual)	-
	(Date first transacted business in FI (SEE SECTIONS 607,1501 & 607,1502 E 300 St. Petersburg FL 33702	orida, if prior to registration) F.S., to determine penalty liab	pility)	-
	(Principal office	troot orlange)		_
7901 4th St N ST	E 300 St. Petersburg FL 33702	areet address)		
	(Current mailing a	ddress, if different)		
Name and <u>stree</u>	et address of Florida registered agent: (P.O. B Registered Agents Inc	ox NOT acceptable)	2023 DEC	(g
ffice Address:	7901 4th St N STE 300		-6	Carres (
	St. Petersburg	, Florida	P# 6:	
	(City)	(Zip code)	OI	
laving been nam esignated in this orther agree to c	ent's acceptance: ed as registered agent and to accept service of application, I hereby accept the appointmen omply with the provisions of all statutes relatives with and accept the obligations of my positions.	t as registered agent and ag tive to the proper and compi	ree to act in this capa-	city.
3	Duvid Goberts			
	(Registered agent's signa	ture)		

^{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.

12/6/2023 07 23:03 PST	To: 18506176383	Page: 3/4	From, Registered Agents Inc
(E) 31 E 0 E 0 1 2 1 0 1 0 1 0 1	10, 10000170000	: 600.007	I TOM. NEUISTEICU AGEMIS M.

Fax: 8134365206

A. DIRECTORS						
□Chairman	Name:	Chairman	Linda Tibbetts Name:			
□Vice Chairman	Address:	□ Vice Chairman	Address:			
⊠ Director	426 Alcove Dr	∠ Director	7901 4th St N STE 300			
	Groveland FL 34736	☐ President	St. Petersburg FL 33702			
□Vice President		□ Vice President				
☐ Secretary	☐ Treasurer	☑ Secretary	☑ Treasurer			
□Other	Other	□Other	□ Other			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□ Vice Chairman	Address:			
□Director		[]Director				
□President		□President				
□Vice President		□ Vice President				
□ Secretary	☐ Treasurer	□Secretary	□ Treasurer			
□Other	Other	Other	D(ther			
□Chainnan	Name:	□ Chairman	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. 12. Signature of Director 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. Frank Tibbetts, PRESIDENT

12/6/2023 07:23:03 PST. To: 18506176383 Page: 4/4 From: Registered Agents Inc Fax: 8134365206



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

Date: November 30, 2023

To Whom It May Concern:

I hereby certify that according to the records of this office.

FET CONSTRUCTION, INC.

Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which.

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travio Galein

Certificate Number: 23110553660

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: hing