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Division of Corporations

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LICENSES ETC INC  
Account Number : I20070000159  
Phone : (239)777-1028  
Fax Number : (877)275-3593

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

Email Address: SUPPORT@LICENSESETC.COM

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DIVISION OF CORPORATIONS  
STATE OF FLORIDA**FOREIGN PROFIT/NONPROFIT CORPORATION****Engineered Systems, Inc.**

Certificate of Status	1
Certified Copy	1
Page Count	06
Estimated Charge	\$87.50

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ENGINEERED SYSTEMS, INC.  
Name of corporation - must include suffix

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:

TODD BABBITT  
Name of Person  
LICENSES, ETC., INC.  
Firm/Company  
27911 CROWN LAKE BLVD  
Address  
BONITA SPRINGS, FL 34135  
City/State and Zip code  
SUPPORT@LICENSESETC.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TODD BABBITT at ( 239 ) 777-1028  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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**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. ENGINEERED SYSTEMS, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

**ENGINEERED SYSTEMS INC. OF DOTHAN**

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. ALABAMA**

(State or country under the law of which it is incorporated)

**3. 63-0685954**

(FEI number, if applicable)

**4. 05/29/1975**

(Date of incorporation)

**5.**

(Date of duration, if other than perpetual)

**6.**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 486 ROSS CLARK CIRCLE, DOTHAN, AL 36303**

(Principal office street address)

**P.O BOX 1207, DOTHAN, AL 36302**

(Current mailing address, if different)

**8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**

Name: **LICENSES, ETC., INC.**

Office Address: **27911 CROWN LAKE BLVD SUITE #211**

**BONITA SPRINGS**

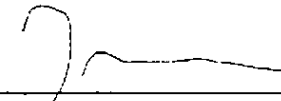
(City)

, Florida **34135**

(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.*



(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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**A. DIRECTORS**

☒ Chairman Name: JOHN WATSON

☐ Vice Chairman Address: 968 WESTGATE PARKWAY

☐ Director DOTHAN, AL 36303

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: FELTON WOODHAM

☐ Vice Chairman Address: 108 N ENGLEWOOD DRIVE

☐ Director DOTHAN, AL 36303

☒ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: J WAYNE PALMER

☐ Vice Chairman Address: 3600 BROOKSIDE DRIVE

☐ Director DOTHAN, AL 36303

☐ President \_\_\_\_\_

☒ Vice President \_\_\_\_\_

☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: JOHN WATSON DOWNS

☐ Vice Chairman Address: 1211 WOODLAWN DRIVE

☐ Director DOTHAN, AL 36301

☐ President \_\_\_\_\_

☒ Vice President \_\_\_\_\_

☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director \_\_\_\_\_

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director \_\_\_\_\_

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_

☐ 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. John Watson Downs  
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. J. Watson Downs  
(Typed or printed name and capacity of person signing application)

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Wes Allen  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, Wes Allen, Secretary of State of Alabama, having custody of the  
Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Engineered Systems, Inc. was  
formed in Houston County on May 29, 1975. The Alabama Entity Identification  
number for this entity is 000-037-759. I further certify that the records do not  
disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my  
hand and affixed the Great Seal of the State, at the  
Capitol, in the city of Montgomery, on this day.

01/26/2024

Date

A handwritten signature in black ink, appearing to read 'Wes Allen', is written over a horizontal line.

Wes Allen

Secretary of State