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

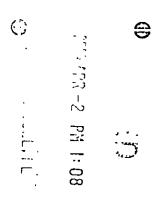


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COVER LETTER

	gistration Section vision of Corporations					
SUBJEC	EASTERN ENGINEERING INC.					
		Name of corporation - must include suffix				
Dear Sir or	Madam:					
"Certificate		f Good Stan	Authorization to Transact Business in Florida," ding" and check are submitted to register the ss in Florida.			
Please retu	rn all correspondence concerning	g this matter	to the following:			
JOHN H. C	OLE					
		Name of I	Person			
EASTERN	ENGINEERING INC.					
		Firm/Com	pany			
148 BLUEC	GRASS PKWY					
		Addre	SS			
LEBANON	. TN 37090-8947					
		City/State ar	nd Zip code			
JCOLE@E	ASTERNENGINEERING.US					
	E-mail address:	(to be used for	or future annual report notification)			
For further	information concerning this ma	; tter, please c	all:			
JOHN H. C	OLE	615	502.0122			
Na	ame 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			
	s a check for the following amou check payable to: FLORIDA DER Filing Fee	PARTMENT Fee & □	OF STATE \$78.75 Filing Fee & Certified Copy Certified Copy 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.

L EASTERN ENG	DINEERING INC.		
(Enter name of c	orporation; must include "INCORPORATED." orp," "Inc.," "Co.," or "Corp.")	" "COMPANY," "CORPORATIO	DN."
EASTERN ELE	CTRICAL ENGINEERING INC.		
(If name unavail	able in Florida, enter alternate corporate name ;	adopted for the purpose of transact	ing business in Florida)
2. TENNESSEE	3	20-0816569	
	y under the law of which it is incorporated)	(FEI number, if a	applicable)
4. 3/1/2004	5.	(PERPETUAL)	
	of incorporation)	(Date of duration, if other than perpetual)	
6. (NOT YET.)			
v	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15		lity)
7. 148 BLUEGRAS	S PKWY., LEBANON, TN 37090-8947		
(Principal office <u>s</u> (SAME)		ce <u>street</u> address)	0,53
	(Current mailin	g address, if different)	ว วบ เ
8. Name and stree	<u>et address</u> of Florida registered agent: (P.O	D. Box NOT acceptable)	; rs
Name:	REGISTERED AGENTS INC		PH :
Office Address:	7901 4TH ST.N. STE 300		:: O
	ST. PETERSBERG	, Florida ³³⁷⁰²	
	(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.

(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.

A. DIRECTORS							
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director	LEBANON, TN 37090	□Director					
President		□President					
□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	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	Other				
individuals may be	Use an attachment to report more than six (6). The attact added to the index when thing year Florida Department	chment will be image nt of State Annual Re	d for reporting purposes only. Non-indexed port form.				
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. John H. Cale							



Division of Business Services **Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

JOHN COLE

148 BLUEGRASS PKWY LEBANON, TN 37090-8947 December 28, 2023

Request Type: Certificate of Existence/Authorization

Request #:

0562243

Issuance Date: 12/28/2023

Copies Requested:

Document Receipt

Receipt #: 008525430

Filing Fee.

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3864839124

\$20.00

Regarding:

Eastern Engineering, Inc.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 03/01/2004

Status:

Active

Duration Term:

Perpetual

Business County: WLSON COUNTY

Control #:

464509

Date Formed: Formation Locale: TENNESSEE

03/01/2004

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Eastern Engineering, Inc.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above:
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User

Verification #: 064855020