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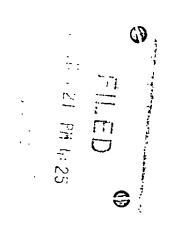
(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Business Ellik) Halley							
(Document Number)							
Certified Copies Certificates of Status							
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Special Instructions to Filing Officer:							





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T. LEMIEUX JUN 1 2 2024



### **COVER LETTER**

TO:		tration Section of Corporations			
SUBJI	rct.	Precision Industrial Construction	n, Inc.	•	
.,000	LC1.	Name of	corporation	- must include suffix	
Dear Si	ir or M	adam:			
"Certifi	icate of	"Application by Foreign Corp Existence," or "Certificate of ced foreign corporation to tran	Good Stan	ding" and check are subm	
Please	return a	all correspondence concerning	this matter	to the following:	
Sandy V	West				
	-		Name of	Person	
Precisio	on Indus	strial Construction, Inc.			
			Firm/Con	pany	
1555 D	own Riv	ver Dr			
<u> </u>			Addre	ess	
Woodla	and, WA	x 98674			
		(	City/State a	nd Zip code	
sandy.w	vest@pi	cateam.com			
		E-mail address: (	to be used f	or future annual report no	etification)
For fur	ther inf	ormation concerning this matt	er, please c	all:	
Sandy West		(360	Area Code Daytime Telephone Numb		
	Name	e of Person	Area Cod	e Daytime Telepho	one 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		ction porations
	nake ch	check for the following amour eck payable to: FLORIDA DEP, ng Fee	ARTMENT	OF STATE  \$78.75 Filing Fee &  Certified Copy	☐ \$87.50 Filing Fee. Certificate of Status & 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.

"Inc.," "Co.," "C	orporation; must include "INCORPORA" orp," "Inc," "Co," or "Corp.")	TED," "COMPANY," "CORPORATION	N,"	
ŕ	. ,			
(If name unavail	able in Florida, enter alternate corporate r	name adopted for the purpose of transacting	g business in Florid	a)
Washington 2.				
	y under the law of which it is incorporate	ed) (FEI number, if ap	(FEI number, if applicable)	
4. 04/27/2001		5		
(Date	of incorporation)	(Date of duration, if other than perpetual)		
6.				
		ness in Florida, if prior to registration) 507.1502, F.S., to determine penalty liabili	ty)	<del>_</del>
7 1555 Down River	Dr. Woodland, WA 98674			
·· <u> </u>	(Principa	al office street address)		_
		mailing address, if different)		_
	(Curen i	maining address, it different)	r ·	$\mathcal{C}_{\mathcal{D}}$
8 Name and stree	t address of Florida registered agent:	(P.O. Box, NOT acceptable)	· -	
	Incorp Services, Inc.	(1.0. DOX 1401 neceptable)		" FI
Name:	ment between men	— <del></del>	<u>N</u>	<del></del>
Office Address:	3458 Lakeshore Dr		·0	Πi
	Tallahassee	, Florida	PH 4	U
	(City)	(Zip code)	25	
9. Registered age	ent's acceptance:		,	G
Having been nam	ed as registered agent and to accept :	service of process for the ahove stated		
designated in this		ointment as registered agent and agre ites relative to the proper and complet		
	with and accept the obligations of m	ives retailive to the proper and complet by position as registered agent.	e perjormance of	ту ишием.
further agree to co	with and accept the only attention of m			
further agree to co	with and accept the own allowing of			
further agree to co and I am familiar		_ Heather Glenn on behalf of InC	Com Comicos Inc	

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

#### A. DIRECTORS Rodney E Schultz Chairman □ Chairman Name: Address: □Vice Chairman ☐ Vice Chairman Address: □Director □ Director □ President □President □ Vice President \_\_ ☐ Vice President ☐ Treasurer ☐ Treasurer □ Secretary □ Secretary □Other \_\_\_\_\_\_ ☐Other \_\_\_\_\_ Other \_\_\_\_\_ Other \_\_\_\_ Name: \_\_\_\_\_ □ Chairman Name: \_\_\_\_\_ □ Chairman ☐ Vice Chairman Address: □Vice Chairman Address: \_\_\_\_\_ □Director □Director □President □President □Vice President \_\_\_\_\_ □ Vice President □ Treasurer □ Secretary □ Secretary ☐Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □ Chairman □ Chairman Name: \_\_\_\_\_ Name: \_\_\_\_\_\_ ☐ Vice Chairman Address: □Vice Chairman Address: \_\_\_\_\_ Director □ Director □President □ President □ Vice President \_\_\_ □ Vice President □Treasurer □ Secretary ☐ Treasurer ☐ Secretary □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. 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.

Rodney E Schultz, President



Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

#### CERTIFICATE OF EXISTENCE

**OF** 

#### PRECISION INDUSTRIAL CONSTRUCTION, INC.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 04/27/2001.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 05/16/2024 UBI Number: 602 117 985



Given under my hand and the Scal of the State of Washington at Olympia, the State Capital

the R Hobbie

ADS PROPERTY.

Steve R. Hobbs, Secretary of State

Date Issued: 05/16/2024