

F96000001702

Document Number Only

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City State Zip Phone

CORPORATION(S) NAME

400001768454
-04/04/96--01070--009
*****70.00 *****70.00

Autronica, Inc.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 APR -4 PM 12:43

☒ Profit
☒ NonProfit

☐ Amendment

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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. Autronica, Inc.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Georgia
(State or country under the law of which it is incorporated)
3. Applied for
(FEI number, if applicable)
4. January 12, 1996
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.156, F.S.))
7. c/o Coggins Systems 5834 Peachtree Corners East, Norcross, Georgia
30092
(Current mailing address)
8. The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized to do business under the laws of Florida.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: C T Corporation System
Office Address: c/o C T Corporation System, 1200 South Pine
Island Road
Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System

Mary R. Adams

(Registered agent's signature) (Officer)

Mary R. Adams, Assistant Secretary
(Type Name and Title of Officer)

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11. 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. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: Chris Fleetwood
Address: c/o Coggins Systems 5834 Peachtree Corners
East
Norcross, Georgia 30092

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Gene Genaci

Address: c/o Coggins Systems 5834 Peachtree Corners
East

Norcross, Georgia 30092

VC ~~SECRETARY~~
Vice President: Gary Copeland

Address: c/o Coggins Systems 5834 Peachtree Corners
East

Norcross, Georgia 30092

VC ~~VICE PRESIDENT AND ASSISTANT SECRETARY~~
Secretary: Keith Coggins

Address: c/o Coggins Systems 5834 Peachtree Corners
East

Norcross, Georgia 30092


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Treasurer: Barbara Richmond

Address: c/o Coggins Systems 5814 Peachtree Corners East
Norcross, Georgia 30092

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.


(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

KEITH COGGINS, VICE PRESIDENT AND ASSISTANT SECRETARY
(Typed or printed name and capacity of person signing application)

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Secretary of State
Business Information and Services
Suite 315, West Tower
2 Martin Luther King Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 960780065
CONTROL NUMBER : 9601712
DATE INC/AUTH/FILED: 01/12/1996
JURISDICTION : GEORGIA
PRINT DATE : 03/10/1996
FORM NUMBER : 0211

CT CORPORATION SYSTEM
SAMUEL PEARSON
1201 PEACHTREE ST, NE
ATLANTA, GA 30361

CERTIFICATE OF EXISTENCE

I, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

AUTRONICA, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Lewis A. Massey
LEWIS A. MASSEY
SECRETARY OF STATE

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DIVISION OF CORPORATIONS
96 APR - 4 PM '96