-4/6) FRANKLINGTER 6695
To: Qualification/Tax Lien Division of Corporation	
SUBJECT:	GES, INC.
	(Name of corporation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by " "Certificate of Existence", and transact business in Florida.	Foreign Corporation for Authorization to Transact Business in Florida check are submitted to register the above referenced foreign corporation to
Please return all correspondence	ce concerning this matter to the following:
	Hez L. Hollingsworth, Esq.
	(Name of Person)
	Thompson & Hollingsworth, P.A.
	(Firm/Company)
	Post Office Drawer 119 W97525 58
	(Address)
	Forest, MS 39074
	(City/State/Zip)
	ne concerning this matter, please call: at (601) 469-3411 600002341236- -11/07/370103200 ******70.00 ******70
Sarah Federick (Name of Person)	(Area Code & Dertime Televiews Newton)
	MALLING ADDRESS.
COURIER ADDRESS:	MAILING ADDRESS:
COURIER ADDRESS: Qualification/Tax Lien Section	MAILING ADDRESS: Qualification/Tax Lien Section
COURIER ADDRESS: Qualification/Tax Lien Section Division of Corporations	MAILING ADDRESS:
COURIER ADDRESS: Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Qualification/Tax Lien Section Division of Corporations



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 7, 1997

HEZ L. HOLLINGSWORTH, ESQ. THOMPSON & HOLLINGSWORTH, P.A. PO DRAWER 119 FOREST, MS 39074

SUBJECT: G E S, INC. Ref. Number: W97000025389

We have received your document for G E S, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6093.

Freta Lott Corporate Specialist Supervisor

Letter Number: 297A00054034

	OF BOARD OF DI (Please print or type)	RECTORS ARY STALL SUAL
I, the undersigned <u>Kenn</u>	neth George (Name)	, do hereby certify
that this Resolution of the Board of Dire	ectors of <u>GES, In</u>	C.
	(Corporate Name)	
a corporation duly organized and existin	ng under the laws of the State of	Mississippi ,
was duly adopted on	November 17,	, 19 <u>97</u>
Be it resolved, that	G E S, Inc. (Corporate Name)	7
organized and existing in the State of		
<u> </u>	Inc.	for use in Florida.
Dated: <u>Nov. 17, 1997</u>		

ennex Signature of either Chairman, Vice-Chairman or any officer

Kenneth George, President Type or print name

INHS (9(4/96)

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.			GES, INC.					
	words or abbrev	ration; must include the wor iations of like import in lang r partnership if not so contai	guage as will clearl	y indicate that i				
	P			presenti				
2.	Missis			3				<u> </u>
	(State or country	under the law of which it is	incorporated)		(FEI number,	if applicable)	ບໍ່	
4.	October	13, 1992	5	99 vea	rs -		12	
		e of incorporation)			will cease to exi	st or "perpetual	in G	新習
		-		-		· · · S :=		
6.		ated starting date:					7	<u></u>
	(Date first	transacted business in Florid	ia.) (SEE SECTIO	NS 607.1501, 6	07.1502 and 81	7.155, F.S.) ^(ST)	A State	
7.	40	52 Highway 13 South	1			59	9	
1.		JZ RIGHWAY 15 SOULH	·					<u></u>
	Мо	rton, MS 39117				$\sum_{i=1}^{n}$	9	
			urrent mailing add	ess)		<u> </u>		
			U	-				
8.		<u>ectrical Contractin</u>						
	(Purpose(s	s) of corporation authorized	in home state or co	ountry to be card	ried out in state	of Florida)		
a	Name and stre	ot address of Florida re-	ristand agants (NOT		
۶.	Traine and Stie	et address of Florida reg	gistereu agent: (\mathbf{P} . D ox of \mathbf{N}	nali Drop Box	<u>NOT</u> accepta	sie)	
	Name:	CT Corp Systems						
	i tuniç	or our bystems						
Of	fice Address:	906 Olive Street						
~				 MO				
		St. Louis		Florida	63101			
	-	(See_Attache		,	(Zip code)	• -= -		
		(See_Attache	u)					
10	. Registered as	gent'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.

(See Attachment)

(Registered agent's signature)

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: (Street address ONLY - P.O. Box NOT acceptable)

ACCEPTANCE OF APPOINTMENT

RE: GES, INC.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: October 2, 1997

C T CORPORATION SYSTE , î 6

M. S. Green, Asst. Secy.

Chairman:	
Address: _	
_	
Vice Chair	man:
Address:	
	nord Market
Director:	Kenneth George
Address:	4890 Hwy. 13 South
	Morton, MS 39117
<u></u>	
B. OFFIC	CERS (Street address only - P.O. Box NOT acceptable)
resident: _	Kenneth George
	4890 Hwy. 13 South
	Morton, MS 39117
/ice Preside	Morton, MS 39117
	ent: David Kuhn
	Route 1, Box 64-D
ddress:	ent: David Kuhn Route 1, Box 64-D Pulaski, MS 39152
ddress:	ent: David Kuhn Route 1, Box 64-D Pulaski, MS 39152 Suzanne Hall
ddress:	ent: David Kuhn Route 1, Box 64-D Pulaski, MS 39152 Suzanne Hall 2063 Cooperville Road; Morton, MS 39117
ddress: ecretary: ddress: start etary	ent: David Kuhn Route 1, Box 64-D Pulaski, MS 39152 Suzanne Hall 2063 Cooperville Road; Morton, MS 39117 Charlotte George; 4890 Hwy. 13 South, Morton, MS 39117
	ent: David Kuhn Route 1, Box 64-D Pulaski, MS 39152 Suzanne Hall 2063 Cooperville Road; Morton, MS 39117 Charlotte George; 4890 Hwy. 13 South, Morton, MS 39117 Suzanne Hall
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ddress: ecretary: ddress: stant teasurer: ddress:	ent David Kuhn Route 1, Box 64-D Pulaski, MS 39152 Suzanne Hall 2063 Cooperville Road; Morton, MS 39117 Charlotte George; 4890 Hwy. 13 South, Morton, MS 39117 Suzanne Hall 2063 Cooperville Road Morton, MS 39117

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and the state of the

State of Mississippi Secretary of State's Office Eric Clark Secretary of State Jackson, Mississippi CERTIFICATE OF EXISTENCE/AUTHORITY I, ERIC CLARK, Secretary of State of the State of Mississi and as such, the legal custodian of the corporate records required by the laws of Mississippi, to be filed in my off do hereby certify: That on October 13,1992 the state of Mississippi issu Charter/Certificate of Authority to: $G \in S$, INC. That the state of incorporation is MISSISSIPPI. THAT THE PERIOD OF DURATION IS 99 YEARS. That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed. That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State. I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand and seal of office October 01,1997

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ERIC CLARK, Secretary of State