

Document Number Only

CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name

TALLAHASSEE, FL 32301

Address

222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

Northern Glass-Layers, Inc.

RECEIVED  
98 SEP -2 PM 12:30  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

☒ Profit

☐ NonProfit

☐ Limited Liability Co.

☐ Amendment

☐ Merger

☒ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Name Registration

☐ Change of R.A.

☐ Fictitious Name

☐ UCC

☐ Certified Copy

☐ Photo Copies

☐ CUS

☐ Call When Ready

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TALLAHASSEE, FLORIDA

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Acknowledgment

W.P. Verifier

9-2-98

Thanks  
Jeff

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\*\*\*\*\*70.00 \*\*\*\*\*70.00

# 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. Northern Line Layers, 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. Montana

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

3. 81-0376519

(FEI number, if applicable)

4. May 22, 1978

(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 817.156, F.S.))

7. 6780 Trade Center Avenue, Billings, MT 59102

(Current mailing address)

8. General and utility line construction

(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

(Registered agent's signature) (Officer)

Scot Ferraro, 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: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: See attached list of officers

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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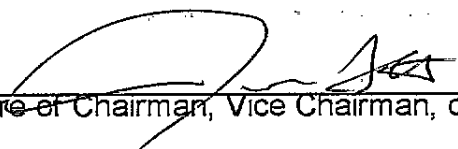
Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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. James R. Bennett, President

\_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

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# **NORTHERN LINE LAYERS, INC.**

## **COMMUNICATIONS & UTILITY LINE CONTRACTORS**

6780 TRADE CENTER AVENUE • P.O. BOX 80290 • BILLINGS, MT 59108-0290  
TELEPHONE (406) 652-1759 • 1-800-735-1370 • FACSIMILE (406) 656-5172



### **NORTHERN LINE LAYERS, INC. – DIRECTORS**

**DONALD BOTTRELL**

**CHAIRMAN**

**TERESA L. BOTTRELL**

**DIRECTOR**

**JAMES R. BENNETT**

**DIRECTOR**

**MARNIE BENNETT**

**DIRECTOR**

### **BUSINESS ADDRESS:**

**6780 TRADE CENTER AVENUE  
BILLINGS, MT 59102**

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**TALLAHASSEE FLORIDA**

# SECRETARY OF STATE

## STATE OF MONTANA

### CERTIFICATE OF EXISTENCE

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

I, **Mike Cooney**, Secretary of State of the State of Montana, do hereby certify that

#### NORTHERN LINE LAYERS, INC.

duly filed its Articles of Incorporation in this office on **May 22, 1978**, and on that date was created a body politic and corporate.

I further certify that all taxes, fees and penalties owed to this state have been paid by said corporation and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said corporation and my records indicate the corporation is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this **August 31, 1998**.

*Mike Cooney*  
**MIKE COONEY**  
Secretary of State

*by Joe Ferraro, Deputy*