

F990000000853

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: PMC / Solutions, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Catherine C. McKillip

(Name of Person)

PMC / Solutions, Inc.

(Firm/Company)

5921 Jefferson NE Suite C

(Address)

Albuquerque, NM 87109

(City/State/Zip)

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DIVISION OF CORPORATIONS  
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Should you need to call someone concerning this matter, please call:

500002773925-4  
-02/12/99-01059-003  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Catherine C. McKillip

(Name of Person)

at ( 505 ) 344-3179

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$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.

1. PMC / Solutions, 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. New Mexico  
(State or country under the law of which it is incorporated)

3. 85-0412144  
(FBI number, if applicable)

4. 6/22/93  
(Date of incorporation)

5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")

6. 1-1-99  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 617.155, F.S.)

7. 5921 Jefferson NE Suite C  
Albuquerque, NM 87109  
(Current mailing address)

8. Project Management / Controls Services  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Dennis Sheats

Office Address: 10010 Belle Rive Blvd # 201  
Jacksonville, Florida, 32256  
(Zip code)

10. 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 my 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)

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.

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12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Morris Legler

Address: 12911 Stephenson Street  
Anchorage, Alaska 99515-3857

Vice Chairman: \_\_\_\_\_

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

Director: Scott Collins

Address: 151 Whitetail Rd. NE  
Albuquerque, NM 87122

Director: Suzanna Valdez

Address: 1309 Duskfire Dr. NW  
Albuquerque, NM 87120

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B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Alberto Garza

Address: 2315 Chapman Ln. NW  
Albuquerque, NM 87104

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

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

Secretary: Catherine C. McKillip

Address: 4815 Shelly Rose NW  
Albuquerque, NM 87114

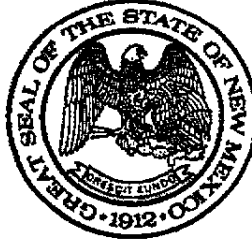
Treasurer: Catherine C. McKillip

Address: 4815 Shelly Rose NW  
Albuquerque, NM 87114

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

13. Catherine C. McKillip Sec/Treas  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Catherine C. McKillip  
(Typed or printed name and capacity of person signing application)



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## OFFICE OF THE PUBLIC REGULATION COMMISSION

### CERTIFICATE OF GOOD STANDING AND COMPLIANCE

IT IS HEREBY CERTIFIED that:  
PMC/SOLUTIONS, INC.

1618792  
a corporation organized under the laws of  
NEW MEXICO  
is duly authorized to transact business in New Mexico, as  
a Domestic Profit Corporation, under the  
BUSINESS CORPORATION ACT  
(53-11-1 to 53-18-12 NMSA 1978)  
having filed its Articles of Incorporation JUNE 22, 1993  
and Certificate of Incorporation issued as of said date.

IT IS FURTHER CERTIFIED that the fees due the Public  
Regulation Commission which have been assessed against the  
aforesaid corporation, have been paid to date and aforesaid  
corporation is in corporate good standing and duly authorized  
to transact business as its corporate existence has not been  
revoked in New Mexico. This Certificate is not to be construed  
as an endorsement recommendation or notice of approval of the  
corporation's financial condition or business activities and  
practices. This certificate of Good Standing and Compliance  
expires: MARCH 15, 1999

Dated: JANUARY 19, 1999

In testimony whereof, the State Public Regulation  
Commission of the State of New Mexico has  
caused this certificate to be signed by its  
Chairman and the seal of said Commission to be  
affixed at the City of Santa Fe

*Lynnda M. Louie*  
Chairman

Bureau Chief