F99000002003

To: Qualification/Tax Lien Section Division of Corporations (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: 80000282553 -03/31/99--01073-Should you need to call someone concerning this matter, please call: Area Code & Daytime Telephone Number) STREET ADDRESS: **MAILING ADDRESS:** Qualification/Tax Lien Section AY 4/19/59 Qualification/Tax Lien Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: ☐ \$70.00 Filing Fee \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee,

Certified Copy

Certificate of Status &

Certified Copy

Certificate of Status



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 2, 1999

CALVIN S. ROBINSON 2117 EGRET DRIVE CLEARWATER, FL 33764

SUBJECT: CALVIN S. ROBINSON ELEC. INC.

Ref. Number: W99000007922

99 APR 19 AM II: 01
SECRETARY OF STATE
AND ASSEE, FLORIDA

We have received your document for CALVIN S. ROBINSON ELEC. INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6094.

Letter Number: 699A00016787

Agnes Lunt Document Specialist

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.				
(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 York (State or country under the law of which it is incorporated) (FEI number, if applicable)				
(State or country under the law of which it is incorporated) (FEI number, if applicable)				
1. 1984 5. Perpetual				
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")				
i. <u>3-1-99</u>				
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)				
. 2117 Scret Drive				
Clearwater FL 33764				
(Current mailing address)				
. Dec Service				
(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)				
Office Address: 2117 Egret Daive				
Name: Calvin S Kobinson Office Address: 2117 Egret Daive Clearwater FL , Florida, 33764 (Zip code) (Zip code)				
(Zip code)				
0. Registered agent's acceptance:				
laving been named as registered agent and to accept service of process for the above stated corporation at the place designated a 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 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.

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:		1
Address:	-	
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		
Address:	T _A	2 10
B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Calvin S Robinson		APR T
Address: 2117 Egrab Or		7
Cleanwater FL 33764 Vice President:	$\Box_{rr'}$	
Address:		
Secretary: Debra A Robinson		
Address: 2117 Egraf Da		
Гтедентат		-
Address:		
NOTE: If necessary, you may attach an addendum to the application listing a		
(Signature of Chairman, Vice Chairman, or any officer listed 4)

State of New York Department of State

I hereby certify, that the certificate of incorporation of CALVIN S. ROBINSON ELECTRICAL, INC. was filed on 07/24/1984, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 14th day of April one thousand nine hundred and ninety-nine.

199904150162 08

Special Deputy Secretary of State

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