F99000004386

TRANSMITTAL LETTER

To: Registration So Division of Co					
SUBJECT: _FREEMAN	MECHANICAL SERVICE (CO., INC.			
	(Name of corpo	ration - must include suffix)			
Dear Sir or Madam:					
	ce", and check are submitted	for Authorization to Transact Busi to register the above referenced for			
Please return all corres	pondence concerning this ma	atter to the following:	as sivid		
KATE	Y L. FREEMAN	*	A CR		
	(Nam	ne of Person)			
FREE	MAN MECHANICAL SERVIC	CE_CO., INC.	FILED STATE STON OF CORPORATION AUG 19 PM 2: 30		
	(Firm	n/Company)	STA ORA 1 2:		
1808	TION 30				
		Address)			
DAVI	NAME ACTION AND 2010/	6765			
DAYI	ONA BEACH, FL 32124-	//State/Zip)			
	(City				
Should you need to cal	l someone concerning this m	natter, please call: -09	02964650 —-2 1/19/9901073002 ***78.75 *****78.75		
KATHY FREEMAN	at (_904	756-1150			
(Name of Pers	son) (A	Area Code & Daytime Telephone N	umber)		
			Name Availability		
STREET ADDRESS:		MAILING ADDRESS:	Document Examiner		
Registration Section		Registration Section	Updater		
Division of Corporation 409 E. Gaines St.	18	Division of Corporations P.O. Box 6327	Updater Verifyer		
Tallahassee, FL 32399		Tallahassee, FL 32314			
Frankrad in a shada fam	Acknowledgement				
Enclosed is a check for	W. P. Verifyer				
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	-	37.50 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.	FREEMAN :	MECHANICAL SERVICE CO	INC					
		oration; must include the word						
		viations of like import in langu				it is a corporation instead of a		
	natural person	or partnership if not so contain	ed in the nan	ne at presen	t.)			
2	INDIANA			3.	35-152	22630		
		y under the law of which it is i	ncorporated)			(FEI number, if applicable)		
		-	• ,		D==D=			
4.	11/23/8		5		PERPI			:
	(Da	ate of incorporation)		(Duration:	Year co	orp. will cease to exist or "perp	etuai")	
6.	1/06/99					. = .		
		acted business in Florida. If c	orporation ha	s not transa	cted busi	iness in Florida, insert "upon q	ualifica	tion.")
		(SEE SECT	ΓΙΟΝS 607.1	501, 607.15	02 and 8	317.155, F.S.)		
-	- 1000 IDIO	TIM TOTTE DATEMANA DEA	CU ET 3	22124_676	5			
1.	a.1808 WRIG	HT DRIVE, DAYTONA BEA	ncipal office		,,,			
		(1 11	noipui oilioo	uuui voo)				
	b.SAME							
		(Cu	rrent mailing	address)			99	₹ <u>s</u>
							99 AUG	SIO
8.	MECHANICA	L MAINTENANCE					ଜ	
		(s) of corporation authorized in	n home state	or country t	o be can	ried out in state of Florida)	و	灵
					_		P	2990
9.	Name and str	reet address of Florida reg	istered ager	it: (P.O. B	ox or M	lail Drop Box NOT accepta	ائے۔۔(ble)	25 25 25
	NI	ህ ለጥፒሚ ፣ ው ው ው ሙ ለ እየ		==		-	ຜ	
	Name:	KAIHI L. FREEMAN				•	0	NS.
Λſ	fice Address.	1808 WRIGHT DRIVE						
O,	nec Address.	1000 11110111 011111						2212
		DAYTONA BEACH		, 1	Florida	32124		
				,	_	32124 (Zip code)		
						_		
10	. Registered a	agent's acceptance:						
Ha	wing been nam	ed as registered agent and to d	iccept service	e of process	for the c	above stated corporation at th	e place	designated
		, I hereby accept the appointn rovisions of all statutes relativ						
		fovisions of all statutes retailv ligations of my position as reg			piele pei	jornunce of my unites, and 1	um jum	HALLES POLISE
		1) 1_ 1	Q.	-				
		Kathy X-	Freem	ian				
		(Reg	istered agent	's signature)			
		\mathcal{I}						

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 an	ad business addresses of officers and/or directors:
A. DIRECTO	
Chairman: _	
Address:	
Vice Chairma	an:
Address:	
Director:	
	•
Address:	
B. OFFIC	ERS
President: _	MICHAEL R. FREEMAN
Address:	1808 WRIGHT DRIVE
	DAYTONA BEACH, FL 32124-6765
Vice Preside	nt:
Address:	
Secretary: _	KATHY L. FREEMAN
Address:	1808 WRIGHT DRIVE
_	DAYTONA BEACH, FL 32124-6765
Treasurer:	KATHY L. FREEMAN
Address: _	1808 WRIGHT DRIVE
_	DAYTONA BEACH, FL 32124-6765
NOTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	CSignature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
	•
14	KATHY L. FREEMAN, SECRETARY/TREASURER (Typed or printed name and capacity of person signing application)

STATE OF INDIANA

OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

FREEMAN MECHANICAL SERVICE CO INC

filed Articles of Incorporation on November 23, 1981, and is a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Eleventh day of August, 1999.

Sue anne GILROY, Secretary of State,

Deputy