# F99200005638

		1 6
To: Qualification/Tax Lien Section		
Division of Corporations	1 - a) 1	<u> </u>
SUBJECT: WAHS BROTHERS CALOLE	corporation - must include suffix)	
(17ame or	COTDOISMOH - High Highway agreed	A 2 0
Dear Sir or Madam:		
The enclosed "Application by Foreign Corpo "Certificate of Existence", and check are sub to transact business in Florida.	oration for Authorization to Transac smitted to register the above referen	or Business in Florida", aced foreign corporation
Please return all correspondence concerning		
Jiy Walts	1	00003025511C -10/26/9901066011
<u> </u>	(Name of Person)	*****87.50 *****87.50
WMUHS BROTHERS	Cable Lond. Inc.	
	(Firm/Company)	
PO Box 141		- ·· - ·
	(Address)	
Philpot, Ky 4	3366	
	(City/State/Zip)	299- 3630
		Name 2/1-2
Should you need to call someone concerning	g this matter, please call:	Availabilit
T. 1. 1. 11.	and Abil Halb	Document
Name of Person) at	(Area Code & Daytime Teleph	one Number
(Marile of Person)	(Mes come se payamo resofu	Update
		Update Verifyer
STREET ADDRESS:	MAILING ADDRES	
Qualification/Tax Lien Section	Qualification/Tax Lie	
Division of Corporations	Division of Corporation	ons
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 3231	4
Enclosed is a check for the following amour	at:	
☐ \$70.00 Filing Fee ☐ \$78.75 Filing F Certificate of S		\$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.

. I with proffers under Construction, Inc	*
Name of compression; must include the word "INCORPORATED", "COM	PANY", "CORPORATION" or
words or abbreviations of like import in language as will clearly indicate the	t it is a corporation instead of a
natural person or parmership if not so contained in the name at present.)	
1	~ !
2 Kentucky 3. lel:	(FEI number, if applicable)
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
(Built of County under His part of Williams III of Francis	•
4. 3-1-95	corp. will cease to exist or "perpetual")
(Date of incorporation)	corp. will cease to existor perpetual )
6. NACyon quelification	THE COLUMN THE
6. (Date first transacted business in Florida.) (SEE SECTIONS 607.150)	1, 607.1502 and 817.155, F.S.)
7. box BARK Cove Owenshors, by 42303	-
P.O. Box 141 Philpot, Ky 42366	<u> </u>
(Current mailing address)	
· · · · ·	
Aslah Aslandina	
8. (nble Contraction authorized in home state or country to be	rarried out in state of Florida)
(Purpose(s) of temporation authorized in notice send of sound years	
9. Name and street address of Florida registered agent: (P.O. Box	or Mail Drop Box NOT acceptable)
Name: <u>CT Corporation System</u>	
Office Address: 1200 S. Pine Island Road	
1200 S. Pille Island Road	
1200 S. Pille Island Road	rida, 33324 (Zin code)
1200 S. Pille Island Road	rida, <u>33324</u> (Zip code)
Plantation ,Flor	
Plantation , Flor  10. Registered agent's acceptance:	(Zip code)
Plantation , Flor  10. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for	(Zip code) the above stated corporation at the place designated in
Plantation , Flor  10. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for this application. I hereby accept the appointment as registered agent and ag	(Zip code)  the above stated corporation at the place designated in res to act in this capacity. I further agree to comply
Plantation , Flor  10. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for this application, I hereby accept the appointment as registered agent and ag with the provisions of all statutes relative to the proper and complete perform	(Zip code) the above stated corporation at the place designated in ree to act in this capacity. I further agree to comply nance of my duties, and I am familiar with and accept
Plantation , Flor  10. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for this application, I hereby accept the appointment as registered agent and ag with the provisions of all statutes relative to the proper and complete perfort the obligations of my position as registered agent.	(Zip code) the above stated corporation at the place designated in ree to act in this capacity. I further agree to comply nance of my duties, and I am familiar with and accept
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Plantation , Flor  Plantation , Flor  10. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for this application, I hereby accept the appointment as registered agent and ag with the provisions of all statutes relative to the proper and complete perform the obligations of my position as registered agent.  And Complete performance.	(Zip code)  the above stated corporation at the place designated in res to act in this capacity. I further agree to comply nance of my duties, and I am familiar with and accept Carol Record Assistant Secretary

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

which it is incorporated.

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



## John Y. Brown III **Secretary of State**

#### **Certificate of Existence**

I, JOHN Y. BROWN III, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

### WATTS BROTHERS CABLE CONSTRUCTION, INC.

is a corporation duly organized and existing under KRS Chapter 271B, whose date of incorporation is March 29, 1995 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 271B.16-220 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 20th day of October, 1999.

Secretary of State

Commonwealth of Kentucky

BThompson/0344654