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Requestor's Name 660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092

City

State

W.F. Verifier

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CORPORATION(S) NAME

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To: Qualification/Tax Lien Section Division of Corporations SUBJECT: Noland-Davis, 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", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida", "Certificate of Person) In Jones (Name of Person) CT CORPORATION SYSTEM (Firm/Company) 1201 Peachtree Street, NE (Address) Atlanta, GA 30361 (City/State/Zip) Should you need to call someone concerning this matter, please call: Io Jones at (800) 241-8922 (Name of Person) Treet Address: Qualification/Tax Lien Section Division of Corporations Qualification/Tax Lien Section Division of Corporations	TRANSMITTAL LETTER
SUBJECT: Noland-Davis, 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: Jo Jones	To: Qualification/Tax Lien Section
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Certificate of Status Certified Copy Certificate of Status &	Enclosed is a check for the following amount:
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FL019 - 9/2/99 CT System Online

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA** 20

Noland-Davis,	Inc.		0.26
(Name of corpo	region: must include the word "II	NCORPORATED", "COMPANY", "CORPORATION" or ce as will clearly indicate that it is a corporation instead of a in the name at present.)	0 PH 3: 18
Alabama		3. 63-1225583	
(State or country	y under the law of which it is inco	orporated) (FEI number, if applicable)	
May 7, 1999		5 perpetual	. 1991
(Da	te of incorporation)	(Duration: Year corp. will cease to exist or "perpe	mar')
upon qualificat	tion		
		(SEE SECTIONS 607,1501, 607,1502 and 817,155, F.S.)	8
P. O. Box 4308	3, Montgomery, AL 36103-4308		9 025
			<u> </u>
	·	t mailing address)	3: 15
lease of outdoo	or signs		ORAFIONS
(Purpose	or signs (s) of corporation authorized in he	ome state or country to be carried out in state of Florida)	3: 18
(Purpose	or signs (s) of corporation authorized in he		A 3: 18 table)
(Purpose	or signs (s) of corporation authorized in he	ome state or country to be carried out in state of Florida) tered agent: (P.O. Box or Mail Drop Box NOT accep	ORAFIONS table)
(Purpose Name and str Name:	or signs (s) of corporation authorized in hereet address of Florida regist	ome state or country to be carried out in state of Florida) tered agent: (P.O. Box or Mail Drop Box NOT accep	and table)
(Purpose Name and str Name:	or signs (s) of corporation authorized in horeet address of Florida regist C T Corporation System 1200 South Fine Island	ome state or country to be carried out in state of Florida) tered agent: (P.O. Box or Mail Drop Box NOT accep	ORATIONS table)
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(Purpose Name and str Name: Office Address:	or signs (s) of corporation authorized in hereet address of Florida regist C T Corporation System 1200 South Pine Islam Plantation	ome state or country to be carried out in state of Florida) tered agent: (P.O. Box or Mail Drop Box NOT accep m d Road , Florida, 33324	3. 18 table)
(Purpose Name and str Name: Office Address:	or signs (s) of corporation authorized in horeet address of Florida regist C T Corporation System 1200 South Fine Island	ome state or country to be carried out in state of Florida) tered agent: (P.O. Box or Mail Drop Box NOT accep m d Road , Florida, 33324	3: 18 table)
(Purpose Name and str Name: Office Address: O. Registered aving been namis application, I ith the provision	or signs (s) of corporation authorized in hereet address of Florida regist C T Corporation System 1200 South Pine Islam Plantation agent's acceptance: ed as registered agent and to accept the appointment of the system of all statutes relative to the promy position as registered agent.	tered agent: (P.O. Box or Mail Drop Box NOT accept M. A. Road , Florida, 33324 (Zip code) cept service of process for the above stated corporation at the as registered agent and agree to act in this capacity. I furth roper and complete performance of my duties, and I am family	e place designated is er agree to comply
(Purpose Name and str Name: Office Address: O. Registered aving been namis application, I ith the provision	or signs (s) of corporation authorized in here reet address of Florida regist C T Corporation System 1200 South Fine Islam Plantation agent's acceptance: ed as registered agent and to accept the appointment of the system of all statutes relative to the principle of the position as registered agent.	tered agent: (P.O. Box or Mail Drop Box NOT accept Mail Road , Florida, 33324 (Zip code) cept service of process for the above stated corporation at the as registered agent and agree to act in this capacity. I further oper and complete performance of my duties, and I am family	e place designated is er agree to comply
(Purpose Name and str Name: Office Address: O. Registered aving been namis application, I ith the provision	or signs (s) of corporation authorized in here reet address of Florida regist C T Corporation System 1200 South Fine Islam Plantation agent's acceptance: ed as registered agent and to accept the appointment of the system of all statutes relative to the principle of the position as registered agent.	tered agent: (P.O. Box or Mail Drop Box NOT accept M. A. Road, Florida,33324 (Zip code) The complete performance of my duties, and I am familiary to be carried out in this capacity. I further toper and complete performance of my duties, and I am familiary to be carried out in this capacity. I further toper and complete performance of my duties, and I am familiary to be carried out in this capacity.	e place designated is er agree to comply

^{12.} Names and addresses of officers and/or directors: (Street address ONLY • P.O. Box NOT acceptable) PL019 - 9/2/99 C T System Online

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman:	
	<u> </u>
Address:	9
	Se Carrie
Vice Chairman:	8 8000
Address:	- 3 O
	9. 17.
Director: William T. Davis	
Address: 502 Forest Circle, Troy, AL 36081	
Director: T. F. Nolan	g
Address: 27 Creek Drive, Montgomery, AL 36117	99
Andress: 27 Creek Drive, Montgomery, AD 39117	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	9 320
President: William T. Davis	PA RECO
Address: 502 Forest Circle, Troy, AL 36081	. A.
Address: 3027 viol. 02010; 2107; 1	## ## ## ## ## ## ## ## ## ## ## ## ##
Vice President: T. F. Noland	
Address: 27 Creek Drive, Montgomery, AL 36117	
Secretary: T. F. Noland	1
Address: 27 Creek Drive, Montgomery, AL 36117	
Treasurer: William T. Davis	
Address: 502 Forest Circle, Troy, AL 36081	
Address. 3021 tiest edito, 1.01, FB 5000.	
NOTE: If necessary, you may attach an addendum to the application listing additional office	rs and/or directors.
13. William J. David (Signature of Chairman, Vice Chairman, or any officer listed in number 12 o	f the application
(Signature of Chairman, Vice Chairman, or any officer fisted in mainteer 12 of 14. William T. Davis, President	r are approximent

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

STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

in this office for mu the domestic corporation records on file disclose that Noland-Davis, Inc. incorporated in Montgomery County, Montgomery, Alabama on May 1999. further certify the records do not disclose that that Noland-Davis, Inc. has been dissolved.____

99 DEC -9 PM 3: 18



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

November 29, 1999

Date

Jin Bennen

Jim Bennett

Secretary of State