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Certified Copies Certificates of Status		
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COVER LETTER

TO: Registration Section Division of Corporations		
EAD CONTROL EVETE	MC II C	
SUBJECT: EAD CONTROL SYSTEMS, LLC (Name of Limited Liability Company)		
,	,	
	ility Company for Authorization to Transact Business in mitted to register the above referenced foreign limited	
Please return all correspondence concerning this ma	tter to the following:	
Jill D. Fiddler		
(Nam	ne of Person)	
Woods & Aitken LLP		
(Firm/Company)		
301 S. 13th St., Ste. 500	0	
(Address)		
Lincoln Nobrocko 6950	0	
Lincoln, Nebraska 68508 (City/State and Zip Code)		
For further information concerning this matter, pleas	se call:	
Jill D. Fiddler	at (402) 437-8500	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
•	Division of Corporations	
	Clifton Building 2661 Executive Center Circle	
•	Tallahassee, FL 32301	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\Bigcirc \\$130.00 Filing Fee & Certificate of St	☐\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Certificate tatus Certified Copy of Status & Certified Copy	
	opy of this application to me in the enclosed	
self-addressed stamped envelope.		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. EAD CONTROL SYSTEMS, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "		_
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or '	LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "L Company," "L.L.C.," "LLC.")	a copy of the imited Liab	_ written
2. Nebraska (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)		
4. May 23, 2007 (Date of Organization) 5. Perpetual (Duration: Year limited liability company versits or "perpetual")	will cease to	2.
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	ال 77	SECRE
7. 4610 S. 133rd Street, Ste. 106	- 23	- <u>-</u>
Omaha, NE 68137		
(Street Address of Principal Office)	7:	,
8. If limited liability company is a manager-managed company, check here 🗹	35	
9. The name and usual business addresses of the managing members or managers are as follows:	ws:	٠.
Engineering Automation & Design, Inc.		
4610 S. 133rd Street, Ste. 106		_
Omaha, NE 68137	·	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign translation of the certificate under eath of the translator must be submitted.)		ecords in
11. Nature of business or purposes to be conducted or promoted in Florida: Custom de	sign ar	<u>n</u> d
fabrication of processing plant panels and integration of control s		
State M. wicht		
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes	•	
an affirmation under the penalties of perjury that the facts stated herein are true.) Engineering Automation & Design, Inc., By: Stephen M. Lichter, P.E., President		
Typed or printed name of signee	•	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

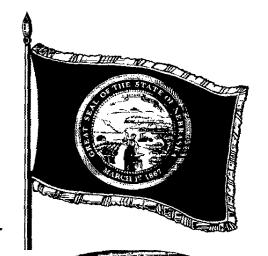
1. The name of the Limited Liability Company is:		
EAD CONTROL SYSTEMS, LLC		
If name unavailable, the alternate name to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:		
C T Corporation System		
(Name)		
1200 South Pine Island Road		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Plantation, FL 33324		
City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

James M. Halpin
(Signature) Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF



NEBRASKA

United States of America, State of Nebraska Department of State Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

EAD CONTROL SYSTEMS, LLC

with its registered office located in OMAHA, Nebraska, filed Articles of Organization in this office on May 23, 2007.

I further certify that said limited liability company is in existence as of this date.

In Testimony W

have hereunto set my hand and fillxed the Great Seal of the State of Nebraska on July 2, 2007.

SECRETARY OF STATE

