000006510 Division of

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Florida Department of State

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FLORIDA/FOREIGN LIMITED LIABILITY CO

Diversified Piping Systems, LLC

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November 5, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION

SUBJECT: DIVERSIFIED PIPING SYSTEMS, LLC

REF: W07000054370

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7 NOV -5 PH 3: 45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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

IN COMPILANCE WITH SECTION GORGO, FLORIDA SCHIUTES, THE FOLLOWING IS SCHMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF PLORIDA: Diversified Piping Systems LLC (Name of Foreign Limited Liability Company) (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) comment is organized) 5/8/2006 (Duration: Year limited liability contrany will cesse to (Date of Organization) excist or "perpetual") (Date first temasoled business in Florids, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 2340 HWY 101 SOUTH GREER, SC 29651 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here K 9. The name and usual business addresses of the managing members or managers are as follows: JAMES D. WOODARD - 2340 HWY 101 SOUTH, GREER, SC 29651 10. Attached is an original cortificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign isnguage, a translation of the certificate under eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: CIVIL ENGINEERING AND GENERAL CONSTRUCTION AND MECHANICAL CONSTRUCTION Signature of a member or an authorized representative of a member. (hydrocardance with section 608.406(3), F.S., the execution of this document constitutes n affirmation under the populities of perjury that the flore stated homin are true.) JAMES D. WOODARD, MANAGER

FLAST - SIGNAS C'T Symme Online

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 o	of the Limited Liability Company is:	•
	DIVERSIMED PIPING SYSTEMS,LLC	
2. The name a	and the Florida street address of the registered agent and office are:	· .1
	C T Corporation System	PER SINT
	(Name)	强 2
	1200 South Pine Island Road	PSS.
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	EE FLS
	Plantation, Florida 33324	£ Ω.
	City/State/Zip	gr -
liability compa agent and agre relating to the	amed as registered agent and to accept service of process for the above starty at the place designated in this certificate, I hereby accept the appointment to act in this capacity. I further agree to comply with the provisions of a proper and complete performance of my datles, and I am familiar with analy position as registered agent as provided for in Chapter 608, Florida Start Componition Bystein Kimberly Breunling Assistant Secretary	ent as registered Il statutes I accept the

Filing Fee for Application Designation of Registered Agent

Cartified Copy (optional)
Certificate of Status (optional)

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STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, 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 proper official to execute this certificate.

I further certify that records of this office disclose that

DIVERSIFIED PIPING SYSTEMS, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on May 08, 2006, and was in existence or authorized to transact business in the State of Indiana on November 02, 2007.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Second Day of November, 2007.

TODD ROKITA, Secretary of State

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