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| Certified Copies Certificates of Status | | | | | | | |
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| Special Instructions to Filing Officer: | | | | | | | |
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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | | |
|------------------------------------|--|--|--|--|--|--|--|
| SUBJE | PRINCIPLE INDUSTRIAL SERVICES, LLC | | | | | | |
| Name of Limited Liability Company | | | | | | | |
| | osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. | | | | | | |
| Please re | turn all correspondence concerning this matter to the following: | | | | | | |
| | LUCAS L. PAPPAS | | | | | | |
| | Name of Person | | | | | | |
| PRINCIPLE INDUSTRIAL SERVICES, LLC | | | | | | | |
| Firm/Company | | | | | | | |
| 715 WESLEY AVE | | | | | | | |
| Address | | | | | | | |
| TARPON SPRINGS, FL 34689 | | | | | | | |
| City/State and Zip Code | | | | | | | |
| | LPAPPAS@SOUTHERNRB.COM | | | | | | |
| | E-mail address: (to be used for future annual report notification) | | | | | | |
| For furth | er information concerning this matter, please call: | | | | | | |
| | LISA SEVASTOU OR ALEX PADZIK 727 940-5395 (X.:25) | | | | | | |
| | Name of Contact Person Area Code Daytime Telephone Number | | | | | | |
| | MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 | | | | | | |
| Enclosed | is a check for the following amount: □ \$125.00 Filing Fee \$ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy | | | | | | |

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT RUSINESS, IN THE STATE OF ELORIDA:

| COMPANY TO TRANSACT BU | JSINESS INTHE STATE OF FLORIDA | 1 : | | | |
|---|--|--|--|-------------------|--|
| PRINCIPLE INDUSTR | RIAL SERVICES, LLC | | | | |
| (Name of Fore | eign Limited Liability Company; mu | st include "Limited Lia | bility Company," "L.L.C.," or " | LLC.") | _ |
| (If name unavailable, enter al Liability Company," "L.L.C." | Iternate name adopted for the purpos | e of transacting busines | ss in Florida. The alternate name | must include "Li | _ mited |
| 2. TEXAS | | 3. 45-3849069 | | | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | J | (FEI number, if applicable) | | - |
| 4. 01/01/2017 | | | | | |
| 5 715 WESLEY AVE | (Date first transacted busine (See sections 605.0904 & 605 | ess in Florida, if prior to .0905, F.S. to determin | o registration.) e penalty liability) | | |
| J | | | | | |
| TARPON SPRINGS, F | FL 34689 (Street Address of | | | e7) . | |
| 715 WESLEY AVE | 17 JAN - | | | | |
| 0 | | | | Sign A | 1 1 |
| TARPON SPRINGS, F | | | | ₩ 1 01 | ¥ |
| | (Mailing | Address) | | 1 11 | T |
| 7. Name and street address | ss of Florida registered agent: (P | O. Box NOT accept | able) | | |
| Name: | LUCAS L. PAPPAS | | _ | 4.5 | "Reputation of the second of t |
| Office Address: | 715 WESLEY AVENUE | | _ | 3 0 | |
| | TARPON SPRINGS | | _ , Florida | | |
| | (City) | | (Zip code) | | |
| designated in this applicate to complywith the provision | egistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. | tment as registered a proper and complete | gent and agree to act in this e performance of my duties, | capacity. I furi | ther agree |
| | (Regist | tered agent's signature) | | | |
| 8. The name, title or capa | acity and address of the person(s) | who has/have author | rity to manage is/are: | | |
| ALEX PADZIK, ADMIN | NISTRTIVE DIRECTOR, 715 W | ESLEY AVE., TAR | PON SPRINGS, FL 34689 | | |
| LISA SEVASTOU, ADM | MINISTRTIVE DIRECTOR, 715 | WESLEY AVE., TA | ARPON SPRINGS, FL 34689 |) | |
| | | ertificate is in a forei | gn language, a translation of | | |
| | Signature | of an authorized perso | n | | |
| This document is executed submitted in a document to | d in accordance with section 605.0 the Department of State constitu | 0203 (1) (b), Florida ates a third degree fel | Statutes. I am aware that any ony as provided for in s.817.1 | false information | 1 |

Typed or printed name of signee

LUCAS L. PAPPAS

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

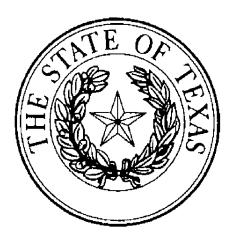
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Principle Industrial Services, LLC (file number 801509372), a Domestic Limited Liability Company (LLC), was filed in this office on November 17, 2011.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 04, 2017.



Prepared by: SOS-WEB

Carlos H. Cascos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/ Phone: (512) 463-5555 Fax: (512) 463-5709

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