

PO180001/1995

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
01 JAN 31 PM 12:23
SECRETARY OF STATE
TALLAHASSEE, FL 32314

SUBJECT: ALL-TYPE METERING INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: PETER J. WEBER
Name (Printed or typed)

1840 SPRING AVE. 500003617775--1
Address -01/31/01--01055--013
*****87.50 *****87.50

OVIEDO, FL. 32765
City, State & Zip

(407) 497-3766
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

2-1-01
10-1
190

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

ALL-TYPE METERING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1840 SPRING AVE.

OVIEDO.

FL. 32765

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONDUCTING BUSINESS IN THE INSTALLATION, MAINTENANCE
AND REPAIR OF ELECTRONIC EQUIPMENT RELATED TO
THE UTILITIES (WATER & ELECTRIC) INDUSTRY.

ARTICLE IV SHARES

The number of shares of stock is:

FIVE HUNDRED, '500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

PETER J. WEBER

1840 SPRING AVE.

OVIEDO

FL. 32765

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

PETER J. WEBER

1840 SPRING AVE.

OVIEDO

FL. 32765

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PETER J. WEBER

1840 SPRING AVE.

OVIEDO

FL.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Peter J. Weber

Signature/Registered Agent

01/26/01

Date

Peter J. Weber

Signature/Incorporator

01/26/01

Date

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to Florida law, the undersigned Corporation organized under the laws of the State of Florida submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation/professional association is: ALL-TYPE METERING INC.

2. The name and address of the registered agent and office is:

PETER J. WEBER
Full name

1840 SPRING AVE.
Address (P.O. Box *not* acceptable)

OVIEDO, FL. 32765
City, State, and Zip

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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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.

Peter J. Weber
SIGNATURE OF REGISTERED AGENT

01/26/01
DATE

Designation of Registered Agent
Filing Fee — \$35.00