

F0400000 3055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

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05/27/04 - 01054 - 007 \*\*70.00

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

04 MAY 27 AM 10:45

FILED

**WOOLF, MCCLANE, BRIGHT, ALLEN & CARPENTER, PLLC**

ATTORNEYS

900 RIVERVIEW TOWER  
900 S. GAY STREET  
KNOXVILLE, TENNESSEE 37902-1810

MAILING ADDRESS:  
POST OFFICE BOX 900  
KNOXVILLE, TN 37901-0900

TELEPHONE (865) 215-1000  
TELECOPIER (865) 215-1015

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NORMAN G. TILMINGTON  
ROBERT I. VANCE  
ROBERT I. VOGEL\*  
LOUIS C. WOOLF

SPECIAL COUNSEL  
MONTY L. WALTON

May 26, 2004

\* Admitted only in New York and New Jersey

**VIA FEDERAL EXPRESS**

Florida Department of State  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Re: Kalthoff Fabricators, Inc.

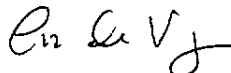
Dear Sir or Madam:

Enclosed for filing please find an Application by Foreign Corporation for Authorization to Transact Business in Florida for Kalthoff Fabricators, Inc. I have enclosed payment in the amount of \$70 for the filing fee.

Please return a filed copy to Gregory C. Logue, Woolf, McClane, Bright, Allen & Carpenter, PLLC, P.O. Box 900, Knoxville, Tennessee 37901-0900.

Thank you for your assistance.

Sincerely,



Elizabeth de Vega  
Legal Assistant

encl.  
010711.0001

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
04 MAY 27 AM 10:45  
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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KALTHOFF FABRICATORS, 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:

Gregory C. Logue, Esq.  
(Name of Person)  
Wolf, McClane, Bright, Allen & Carpenter, PLLC  
(Firm/Company)  
P.O. Box 900  
(Address)  
Knoxville, TN 37901-0900  
(City/State and Zip code)

For further information concerning this matter, please call:

Gregory C. Logue, Esq. at ( 865 ) 215-1000  
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLHASSEE, FLORIDA

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. KALTHOFF FABRICATORS, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Tennessee 3. 62-1047082  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/24/1978 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 1010 Wilder Place, Knoxville, TN 37915  
(Principal office address)

same as above  
(Current mailing address)

8. Installation of fabricated metal hood systems and HVAC systems and  
any other lawful activities.  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

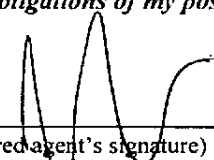
Name: CT Corporation System

Office Address: 1200 South Pine Island Road  
Plantation (Broward County), Florida 33324  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
\_\_\_\_\_  
(Registered agent's signature) Jennifer F. Aultman, Assistant Secretary  
C T Corporation System

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: **David Dugger**

Address: **1010 Wilder Place**

**Knoxville, TN 37915**

Director: **Garvon Boshears**

Address: **1010 Wilder Place**

**Knoxville, TN 37915**

**B. OFFICERS**

President: **David Dugger**

Address: **1010 Wilder Place**

**Knoxville, TN 37915**

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: **Garvon Boshears**


Address: **1010 Wilder Place, Knoxville, TN 37915**

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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 DEPARTMENT OF REVENUE  
 TALLAHASSEE, FLORIDA

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. **David Dugger, President** \_\_\_\_\_

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

**Secretary of State**  
Division of Business Services  
312 Eighth Avenue North  
6th Floor, William R. Snodgrass Tower  
Nashville, Tennessee 37243

ISSUANCE DATE: 05/10/2004  
REQUEST NUMBER: 04131106  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 10/24/1978  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0058694  
JURISDICTION: TENNESSEE

TO:  
KROLL  
1900 CHURCH STREET  
STE 400  
NASHVILLE, TN 37203

REQUESTED BY:  
KROLL  
1900 CHURCH STREET  
STE 400  
NASHVILLE, TN 37203

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

-----  
"KALTHOFF FABRICATORS, INC."  
-----

-----  
IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF  
INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE  
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED  
WITH THIS OFFICE; AND  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED  
-----

-----  
FOR: REQUEST FOR CERTIFICATE

ON DATE: 05/10/04

FROM:  
KROLL DOCUMENT FILING & RETRIEVAL SVCS  
1900 CHURCH STREET  
SUITE 400  
NASHVILLE, TN 37203-0000

RECEIVED:           FEES  
                          \$260.00           \$0.00  
TOTAL PAYMENT RECEIVED:       \$260.00

RECEIPT NUMBER: 00003502661  
ACCOUNT NUMBER: 00442386

*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE

