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(Re	equestor's Name)				
(Address)					
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PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate	s of Status			
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### **COVER LETTER**

TO:	Registration Section				
	Division of Corporations CPH STRUCTURAL ENGIN	EERING. II	NC.		
SUBJ	JECT:				
	Name o	of corporati	on - mu	ist include suffix	
Dear s	Sir or Madam:				
"Certi	nclosed "Application by Foreign Co ficate of Existence," or "Certificate referenced foreign corporation to to	of Good S	tanding	" and check are subn	
Please CHRI	return all correspondence concerni STOPHER HILLMAN, P.E.	ng this mat	ter to th	e following:	<b>*</b>
СРН	STRUCTURAL ENGINEERING, INC.	Name	of Perso	on .	***************************************
38027	FM 1774, STE A	Firm/Co	ompany		
MAG	NOLIA, TX 77355	Ad	dress		·
chillm	nan@cphengineering.com	City/State	and Zi	p code	······································
<del></del>	E-mail address	: (to be use	d for fu	ture annual report no	otification)
For fu	urther information concerning this m	atter, pleas	e call:		
CHERYL HILLMAN 281		826-1848			
-11-1-P-17	Name of Person	at ( Area C	) ode	Daytime Teleph	one Number
	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:		MAILING AD Registration Se Division of Con P.O. Box 6327 Tallahassee, FI	ction rporations
Enclo	sed is a check for the following amo	ount:			
<b>3</b> \$7	0.00 Filing Fee	-		8.75 Filing Fee & rtified Copy	\$87.50 Filing Fee, Certificate of Status of 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.

	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
TEVAC	ble in Florida, enter alternate corporate name	90-0865683	
	****	(FEI number, if appli	
FEBRUARY8,	of incorporation) 5.	(Date of duration, it other that	
(Date	of incorporation)	(Date of duration, if other tha	in perpetual)
38027 FM 1774	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.1 , STE A MAGNOLIA, TX 77355	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	)
•	· (Princip	oal office address)	2016 MKR
. Name and stree Name:	(Current mailing to address of Florida registered agent: (P.C.) URS AGENTS, LLC	ng address, if different)  O. Box NOT acceptable)	MR 21 PK 4: 48
Office Address:	3458 LAKESHORE DR.		
The ridards.	TALLAHASSEE	32312 Florida	,
	(City)	, Florida (Zip code)	
Having been nam lesignated in this urther agree to co	ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoints omply with the provisions of all statutes a miliar with and accept the obligations of URS Agents, LLC  By: Amy Po (Registered)	ment as registered agent and agree relative to the proper and complete of my position as registered agent.	to act in this capacity.

10. 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.

11. Names and business addresses of officers and/or directors:	TILEL		
	2016 HAR 21 PM 4: 4		
A. DIRECTORS  CHRISTOPHER-IILLMAN	PH L.		
Chairman:	TATTAHASSIFF OF STATE		
Address:  MAGNOLIA, TX 77355	जिल्लाम् । जिल्लाम्		
Vice Chairman:			
Address:			
Director:			
Address:			
Director:			
Address:			
B. OFFICERS  CHRISTOPHERHILLMAN  President:			
38027FM 1774,STEA Address:			
MAGNOLIA, TX 77355			
DONALD WAGNER Vice President:			
38027FM 1774,STEA	-		
MAGNOLIA, TX 77355			
Secretary:			
Address:			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing add	ditional officers and/or directors.		
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 at are true and that he or she is aware that false information submitted in a docume a third degree felony as provided for in s.817.155, F.S.			
13. CHRISTOPHERHILLMAN, P.E.			
(Typed or printed name and capacity of person signing	application)		

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



## 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 CPH Structural Engineering, Inc. (file number 801609974), a Domestic For-Profit Corporation, was filed in this office on June 11, 2012.

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

stimony whereof, I have hereunto signed my name

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 March 16, 2016.



Carlos H. Cascos Secretary of State

Phone: (512) 463-5555

Fax: (512) 463-5709

Dial: 7-1-1 for Relay Services