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COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Carolina Tuebine | Support, Inc. |
| Name of corporation - | |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Stand above referenced foreign corporation to transact business | ing" and check are submitted to register the |
| Please return all correspondence concerning this matter to | o the following: |
| Jeanne A. Le Name of Pe | owther |
| | |
| Caeslina Tueb | ine Support, Inc. |
| Firm/Compa | |
| 234 Air Pael | c Blud. |
| Address | |
| Aiken, Sc 298 | <i>205</i> |
| City/State and | Zip code |
| jeanne @ air 1 | st. com r future annual report notification) |
| E-mail address: (to be used fo | future annual report notification) |
| For further information concerning this matter, please ca | il: |
| Teanne A. Lowther at (803 Name of Person Area Code | Daytime Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 |
| Enclosed is a check for the following amount: | |
| | S78.75 Filing Fee & |

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. Carolina Turbine Support, 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. South Carolina 3. 56-2132408
(State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 02/26/1999 5. perpetual (Date of incorporation) (Date of duration, if other than perpetual) Tanuary 1, 2018
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 234 Air Park Blud., Aiken, Sc 29805 (Principal office address) (Current mailing address, it different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) 1001 Florida Avenue, Hangae #3

Tyndall AFB . Florida 32403
(City) (Zip code) Office Address: 9. 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)

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: |
|---|
| A. DIRECTORS |
| Chairman: Michael S Laver |
| Address: 914 Old Granteville Hwy |
| Aiken Sc 29801-7776 |
| Vice Chairman: |
| Address: |
| |
| Director: |
| Address: |
| |
| Discourse. |
| Director: |
| Address: |
| D. Approxime |
| B. OFFICERS |
| President: Michael S., Laver |
| Address: 914 Old Graniteville Huy. |
| Hiren, Sc 29801-7776 |
| Vice President: |
| Address: |
| |
| Secretary: Michael S Lavee |
| Address: 914 Old Graniteville Huy, Aikan, SC 29801-7776 |
| Treasurer: |
| Address: |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| 12 Michael S. Comme |
| Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein |
| are true and that he or she is aware that false information submitted in a document to the Department of State constitutes |
| a third degree felony as provided for in s.817.155. F.S. |
| (Typed or printed name and capacity of person signing application) |

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

CAROLINA TURBINE SUPPORT, INC.,

a corporation duly organized under the laws of the State of South Carolina on February 26th, 1999; and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 27th day of December, 2017.

Mark Hammond, Secretary of State