F25000001074

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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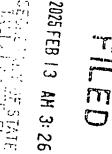


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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Quality Electrical System	ns, Inc.				
	me of corporation	- must include suffix			
Dear Sir or Madam:					
The enclosed "Application by Foreig "Certificate of Existence," or "Certifiabove referenced foreign corporation	cate of Good Stand	ling" and check are subm			
Please return all correspondence cond	erning this matter	to the following:			
Matt Harding					
	Name of I	Person			
Quality Electrical Systems, Inc.					
	Firm/Com	pany	·		
6500 S. Airport Road					
	Addre	SS			
West Jordan, UT 84084					
	City/State ar	id Zip code			
QualityControl@corp.qualityelectricalsy					
E-mail add	lress: (to be used fo	or future annual report no	tification)		
For further information concerning th	is matter, please ca	all:			
Matt Harding	at (<u>801</u>	566-7200			
Name of Person	Area Code	Daytime Telepho	one Number		
STREET/COURIER ADDI Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303		Registration Sec Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
C	A DEPARTMENT	OF STATE \$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.

(If name unavai	lable in Florida, enter alternate corporate name ad		•	
Utah 2.	3.	(FEI number, if applicable)		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)		
4. 9/17/2007				
(Date	e of incorporation)	(Date of duration, if other than perpetual)		
6				
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150		îty)	
7 6500 S. Airport	Road, West Jordan, UT 84084			
·	(Principal office	street address)		
			<u></u>	
	(Current mailing	address, if different)		
	·	,		
8 Name and stre			.c. 20	
	et address of Florida registered agent: (P.O.		2025 F	
8. Name and <u>stre</u> Name:	et address of Florida registered agent: (P.O. Dean Stauffer		2025 FEB	
Name:	et address of Florida registered agent: (P.O.			
Name:	et address of Florida registered agent: (P.O. Dean Stauffer 1079 Tamiami Trl N	Box <u>NOT</u> acceptable)	B 13	
Name:	et address of Florida registered agent: (P.O. Dean Stauffer 1079 Tamiami Trl N		B 13	
Name: Office Address:	et address of Florida registered agent: (P.O. Dean Stauffer 1079 Tamiami Trl N Nokomis (City)	Box <u>NOT</u> acceptable)	EB 13	
Name: Office Address: 9. Registered ag Having been nan	et address of Florida registered agent: (P.O. Dean Stauffer 1079 Tamiami Trl N Nokomis (City) ent's acceptance: ned as registered agent and to accept service	Box NOT acceptable) Florida 34275 (Zip code) of process for the above state	EB 13 AM 3: 26 Corporation at the place	
Name: Office Address: 9. Registered ag Having been nan designated in this	et address of Florida registered agent: (P.O. Dean Stauffer 1079 Tamiami Trl N Nokomis (City) cent's acceptance: med as registered agent and to accept services application, I hereby accept the appointme	Box NOT acceptable) Florida 34275 (Zip code) of process for the above state ont as registered agent and agr	d corporation at the place to act in this capacity.	
Name: Office Address: 9. Registered ag Having been nan designated in this further agree to o	et address of Florida registered agent: (P.O. Dean Stauffer 1079 Tamiami Trl N Nokomis (City) tent's acceptance: med as registered agent and to accept services application, I hereby accept the appointment comply with the provisions of all statutes reli	Box NOT acceptable) Florida 34275 (Zip code) of process for the above state and as registered agent and agrative to the proper and comple	d corporation at the place to act in this capacity.	
Name: Office Address: 9. Registered ag Having been nan designated in this further agree to o	et address of Florida registered agent: (P.O. Dean Stauffer 1079 Tamiami Trl N Nokomis (City) cent's acceptance: med as registered agent and to accept services application, I hereby accept the appointme	Box NOT acceptable) Florida 34275 (Zip code) of process for the above state and as registered agent and agrative to the proper and comple	d corporation at the place to act in this capacity.	
Name: Office Address: 9. Registered ag Having been nan designated in this further agree to o	et address of Florida registered agent: (P.O. Dean Stauffer 1079 Tamiami Trl N Nokomis (City) tent's acceptance: med as registered agent and to accept services application, I hereby accept the appointment comply with the provisions of all statutes reli	Box NOT acceptable) Florida 34275 (Zip code) r of process for the above state at as registered agent and agrative to the proper and completion as registered agent.	d corporation at the place 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.

A. DIRECTORS								
□ Chairman	Name: Kenneth Worton			□Chairman	Name:			
□Vice Chairman	Address: 6500 S. Airport Road		oad	□Vice Chairman				
□Director	West Jordan, U			□Director				
□President				□President				
□ Vice President				□Vice President				
□Secretary		□Treasure	:ा	Secretary		□Treasurer		
■Other	Manager	□Other _		□Other		□Other		
□Chairman	Name:			□Chairman	Name:			
□Vice Chairman	Address:			□Vice Chairman	Address:			
□Director				□Director				
□President				□President		 		
□Vice President				□Vice President				
□Secretary		□Treasure	r	□Secretary		□Treasurer		
□Other		□Other _		□Other		□Other		
□Chairman	Name:			□Chairman	Name:			
□Vice Chairman	Address:			□Vice Chairman	Address:			
□Director				□Director				
□President				□President				
□Vice President				□Vice President				
□Secretary		□Treasure	1	□Secretary		□Treasurer		
□Other		□Other _		□Other		□Other		
	added to the inde:	x when filip	g your Florida Departmer	it of State Annual Re	port form.	irposes only. Non-indexed		
			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.								



SPENCER J COX Governor

DEIDRE M. HENDERSON Lieutenant Governor

UTAH DEPARTMENT OF COMMERCE

Division of Corporations and Commercial Code

MARGARET W. BUSSE Executive Director ADAM WATSON Division Director

February 05, 2025

CERTIFICATE OF EXISTENCE

Registration Number: 6752553-0142

Business Name: QUALITY ELECTRICAL SYSTEMS, INC.

Principal Office Address: 6500 S AIRPORT ROAD, WEST JORDAN, UT 84084

Registered Date: 09/17/2007

Entity Type: DOMESTIC BUSINESS CORPORATION

Current Status: ACTIVE - CURRENT

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division unless the status above is delinquent; and, that Articles of Dissolution have not been filed.



Adam Watson

Director

Division of Corporations and Commercial Code

Certificate Number: 202502051631985
Enter the certificate number at https://businessregistration.utah.gov/ to verify this certification.