

CT CORPORATION SYSTEM

F01000002340

CORPORATION(S) NAME

Service Resources, Inc.

FILED
01 APR 24 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/24

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

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DIVISION OF CORPORATIONS
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NOT NEEDED
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SUFFICIENCY OF FILING

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

4/24/01

(8)

Order#: 4154782

Ref#: _____

Amount: \$ _____

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-04/24/01--01072--016
*****70.00 *****70.00

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

A CCH LEGAL INFORMATION SERVICES COMPANY

5/K 4/24



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 24, 2001

CT CORPORATION SYSTEM

SUBJECT: SERVICE RESOURCES, INC.
Ref. Number: W01000009244

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TALLAHASSEE, FLORIDA

We have received your document for SERVICE RESOURCES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

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SUFFICIENCY OF

Michelle Hodges
Document Specialist

Letter Number: 501A00024278

Please back-date
Thurs
[Signature]

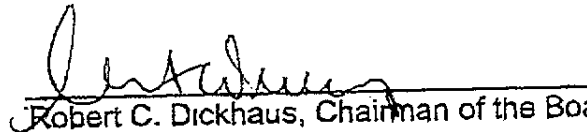
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TALLAHASSEE, FLORIDA

RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned Chairman of the Board of Directors, do hereby certify that this Resolution of the Board of Directors of Service Resources, Inc. a corporation duly organized and existing under the laws of the State of Delaware, was duly adopted on April 26, 2001.

Resolved, that Service Resources, Inc. organized and existing in the State of Delaware hereby adopts the name Service Resources (Delaware), Inc. for use in Florida.

Dated: April 26, 2001


Robert C. Dickhaus, Chairman of the Board

**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

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TALLAHASSEE, FLORIDA

1. Service Resources, Inc.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware

(State or country under the law of which it is incorporated)

3. 58-2309721

(FEI number, if applicable)

4. 03/14/1997

(Date of incorporation)

5. Perpetual

(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. 5000 Olde Towne Parkway, Marietta, GA 30068

(Principal office address)

same

(Current mailing address)

Provide retail facility management services.

8. _____

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

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.

C T Corporation System

By: *Connie Boyer*

(Registered agent's signature)

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

SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Robert Dickhaus

Address: 5000 Olde Towne Parkway

Marietta, GA 30068

Vice President: Jeffrey Fasy

Address: 5000 Olde Towne Parkway

Marietta, GA 30068

Secretary: Jerry Harrison

Address: 5000 Olde Towne Parkway Marietta, GA 30068

Treasurer: _____

Address: _____

SEE ATTACHMENT

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

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Jeffrey T. Fasy VP Finance

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

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TALLAHASSEE, FLORIDA

Attachment to Florida
 Application By Foreign Corporation for Authorization to Transact Business In Florida
Officers & Directors

1. Full Name: Robert Dickhaus
 Officer/Director: Officer, Director
 Officer's Title: President and Chairman
 Business Address: 5000 Olde Towne Parkway
 City: Marietta
 State: GA
 ZIP Code: 30068
2. Full Name: Jerry Harrison
 Officer/Director: Officer
 Officer's Title: Secretary
 Business Address: 5000 Olde Towne Parkway
 City: Marietta
 State: GA
 ZIP Code: 30068
3. Full Name: Jeffrey Fasy
 Officer/Director: Officer
 Officer's Title: Vice President of Finance
 Business Address: 5000 Olde Towne Parkway
 City: Marietta
 State: GA
 ZIP Code: 30068
4. Full Name: Kenneth De Angelis
 Officer/Director: Director
 Business Address: 5000 Olde Towne Parkway
 City: Marietta
 State: GA
 ZIP Code: 30068
5. Full Name: Thomas Stribling
 Officer/Director: Director
 Business Address: 5000 Olde Towne Parkway
 City: Marietta
 State: GA
 ZIP Code: 30068
6. Full Name: James Campbell
 Officer/Director: Director
 Officer's Title: --N/A--
 Business Address: 5000 Olde Towne Parkway
 City: Marietta
 State: GA
 ZIP Code: 30068

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7. Full Name: Thomas Cole
Officer/Director: Director
Officer's Title: --N/A--
Business Address: 5000 Olde Towne Parkway
City: Marietta
State: GA
ZIP Code: 30068
8. Full Name: Charles O'Dell
Officer/Director: Director
Business Address: 5000 Olde Towne Parkway
City: Marietta
State: GA
ZIP Code: 30068

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State of Delaware
Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SERVICE RESOURCES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF APRIL, A.D. 2001..

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TALLAHASSEE, FLORIDA



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

2727199 8300

AUTHENTICATION: 1093199

010193186

DATE: 04-23-01