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(Re	questor's Name)			
(Ad	dress)			
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	, 			
(Cit	y/State/Zip/Phone	· #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





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SECRETARY OF STATE

(p

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Menefee & W	iner Inc.	
	(Name of corporation - must include suffix)	
Dear Sir or Madam:		
	preign Corporation for Authorization to Transact Business in Florida," heck are submitted to register the above referenced foreign corporation to	
Please return all correspondence	concerning this matter to the following:	
James E Winer		
	(Name of Person)	
Menefee & Winer PC	(Name of Person) WOS - 4391	
	(Firm/Company)	
887 W Marietta Street, N	// Cottage Suite 3	
007 VV Manetta On Cot, 1V	(Address)	. •
Atlanta, GA 30318	· = 0	
	(City/State and Zip code)	1
		-K
For further information concerni	ng this matter, please call:	MK 212
	TO R	-
Jim Winer	at (404) 876-0793	A TABLES
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporation	Division of Corporations	
409 E. Gaines St.	P.O. Box 6327	
Tallahassee, FL 32399	Tallahassee, FL 32314	
Enclosed is a check for the follo	wing amount:	
•	5 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, rtificate of Status Certified Copy Certified Copy Certified Copy	



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 16, 2005

JAMES E. WINER MENEFEE & WINER PC 887 W. MARIETTA STREET, NW, COTTAGE STE ATLANTA, GA 30318

SUBJECT: MENEFEE & WINER INC.

Ref. Number: W05000043191

We have received your document for MENEFEE & WINER INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The last page of your application was left blank. Please list the titles, names, and addresses for your officers and directors, and please have one of them sign the bottom of the page.,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with 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) 245-6958.

Lee Rivers **Document Specialist**

Letter Number: 105A00057267

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.

	Winer Inc.		
(Enter name of c	corporation; must include "INCORPORATED	," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")		
	^		
Menete	e & Winer CORP.		·
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busine	ess in Florida)
2. Georgia	3	58-206661	
	under the law of which it is incorporated)	(FEI number, if applicable)	
4. July 7, 199	2 5	Perpetual	
T	of incorporation)	(Duration: Year corp. will cease to exist or	"perpetual")
	•		<u>2</u> % 95
6	(Date first transacted hyginess	in Florida, if prior to registration)	<u>≥</u> 3 × •
		502, F.S., to determine penalty liability)	A TO
997 W Mar	rietta Street, NW; Cottage Suite 3;	Atlanta GA 30318	28 SSI
7. 007 VV. IVIAI	(Principal office add	7 777	<u> </u>
	` •	,	70 7
887 W. Ma	rietta Steet, NW; Cottge Suite 3; Al		
	(Current mailing add	dress)	
		en en same en	
	ural Service	out to be somial out in state of Florida	
(Purpose(s	s) of corporation authorized in home state or c	ountry to be carried out in state of Florida)	
9. Name and street	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Metropolitan Jax Lofts I, Ltd	- 17.70	
	404 141 01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A05-1206)
Office Address:	421 W. Church Street; Suite 400		
	Jacksonville	, Florida 30220	
	(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.

(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 NA Chairman: _ Address: Vice Chairman: Address: _ Director: Director: Address: **B. OFFICERS** President: Tony Menetee Marietta St NW: Cottage Suite 3 G2A Vice President: Jim Winer Address: 881 w Marietta St Nw. Cottage Suite 3 Atlanta Cm 30318 Secretary: Tony Menefee Address: 887 W. Marietta St NW Cottage Suite 3 Atl Ga 30318 Address: 887 w Marietta St Nw Cottage Suite 3 NOTE; If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) m Winer, Principal, Vice President (Typed or printed name and capacity of person signing application)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 052640194
CONTROL NUMBER : K213719
DATE INC/AUTH/FILED: 07/08/1992
JURISDICTION : GEORGIA
PRINT DATE : 09/21/2005

FORM NUMBER : 211

MENEFEE & WINER, P. C. GEORGIA MILLS 887 W MARIETTA ST NW COTTAGE STE 3 ATLANTA, GA 30318

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georg

MENEFEE & WINER, P.C. A PROFESSIONAL CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



July Cop

Cathy Cox Secretary of State