

F07000002396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch MAY 4 2007

## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Network Services Group, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Bettye McDaniel  
(Name of Person)  
Network Services Group, Inc.  
(Firm/Company)  
1140 Chloe Drive  
(Address)  
Gallatin TN 37066  
(City/State and Zip code)

For further information concerning this matter, please call:

Bettye McDaniel at 615, 230 0185  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

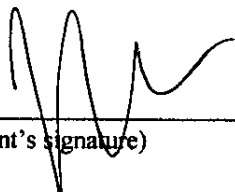
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

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.

1. Network Services Group Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Tennessee 3. 62-1675734  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1-3-1997 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. On or about May 15th 2007 or June 07  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 312 Blue Bird Dr. Goodlettsville TN 37072  
(Principal office address)  
1140 Chloe Dr Gallatin TN 37066  
(Current mailing address)
8. Systems Integrator  
(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 NOT acceptable)
- Name: CT Corporation System
- Office Address: 1200 South Pine Island Rd.  
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.*



Jennifer F. Aultman  
Assistant Secretary

(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**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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**B. OFFICERS**

President: David C. McDaniel

Address: 1140 Chloe Dr. Gallatin TN 37066

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Bettye M. McDaniel

Address: 1140 Chloe Dr Gallatin TN 37066

Treasurer: Bettye M. McDaniel

Address: 1140 Chloe Dr Gallatin TN 37066

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

13. Bettye M. McDaniel  
(Signature of Director or Officer listed in number 12 of the application)

14. Bettye M. McDaniel Secretary/Treasurer  
(Typed or printed name and capacity of person signing application)

**Secretary of State**  
**Division of Business Services**  
**312 Eighth Avenue North**  
**6th Floor, William R. Snodgrass Tower**  
**Nashville, Tennessee 37243**

ISSUANCE DATE: 04/23/2007  
REQUEST NUMBER: 07113508  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/03/1997  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0323883  
JURISDICTION: TENNESSEE

TO:  
NETWORK SERVICES GROUP INC  
1140 CHLOE DR

GALLATIN, TN 37066

REQUESTED BY:  
NETWORK SERVICES GROUP INC  
1140 CHLOE DR

GALLATIN, TN 37066

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"NETWORK SERVICES GROUP, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF  
INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE  
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED  
WITH THIS OFFICE; AND  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOR: REQUEST FOR CERTIFICATE

ON DATE: 04/23/07

FROM:  
NETWORK SERVICES GROUP INC (BLUE BIRD DR  
312 BLUE BIRD DR

GOODLETTSVILLE, TN 37072-0000

	FEES	
RECEIVED:	\$20.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$20.00

RECEIPT NUMBER: 00004162009  
ACCOUNT NUMBER: 00380279



*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE