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Office Use Only

662-637-647-W12000023345



COVER LETTER

TO: New Filing Section Division of Corporation	ns				
SUBJECT: LTT Enterp	orises, Inc.				
		on - must include suffix	**************************************		_
Dear Sir or Madam:					
The enclosed "Application by I "Certificate of Existence," or "Cabove referenced foreign corpo	Certificate of Good St	anding" and check are subm			
Please return all correspondenc	e concerning this matt	ter to the following:			
Michael Davis					
	Name o	of Person			_
LTT Enterprises, Inc	> .				
	Firm/Co	ompany			_
4230 Highway 29, S	Suite 11				
	Ado	dress			
Lilburn, Georgia 300					_
	•	and Zip code			
mdavis@gwinnettcolleg		d for future annual report no	uffication)		_
		- -	inication		
For further information concern	ing this matter, please	e call:			
Michael Davis	at (404	₎ 819-2014		73	J. Z.K.
Name of Person		a Code & Daytime Telephon	e Number	12 MAY	25. 25.
				8- A	####
STREET/COURIER A New Filing Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	as	MAILING AD New Filing Sect Division of Con P.O. Box 6327 Tallahassee, FL	ion porations	PH12: 20	Y OF STATE JORPORATIONS
Enclosed is a check for the follo	wing amount:				
	8.75 Filing Fee & ertificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filir Certificate of Certified Co	of Statu	s &



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 27, 2012

MICHAEL DAVIS 4230 HIGHWAY 29 SUITE 11 LILBURN, GA 30047

SUBJECT: LTT ENTERPRISES, INC.

Ref. Number: W12000023345

VIEWAL THAY OF STATEMS VIEWAL OF LORPORATIONS

We have received your document for LTT ENTERPRISES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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 the corrected original and one copy of 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) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 812A00012905

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. LTT Enterpris				_
	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ED,	," "COMPANY," "CORPORATION,"	
,, -	,			
TTL Enterpr	ises, Inc.			
(If name unavail	lable in Florida, enter alternate corporate na	ıme	adopted for the purpose of transacting business in Florida)
_{2.} Georgia		3.	58-1643360	
(State or country under the law of which it is incorporated)		•	(FEI number, if applicable)	
4. October 23,	, 1985	5.	Perpetual	
(Date of incorporation)			(Duration: Year corp. will cease to exist or "perpetual")	
6. April 4, 201	2			_
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
- 4230 High	way 29, Suite 11, Lilburn, G			
7,4230 Filgriv	(Principal office			_
Meridian C	College, 7020 Professional	Р	kwy. East, Sarasota, Fl. 34240	
	(Current mailing		· · · · · · · · · · · · · · · · · · ·	_
_{8.} Education				_¥. .≥≚.
(Purpose(s	s) of corporation authorized in home state o	T CC	Department of Plorida	Z.C.
9. Name and stree	et address of Florida registered agent: (P .C	J. DOX 110 I deceblable)	
Name:	Michael Davis		<u> </u>	
				凝다
Office Address:	7020 Professional Pkwy. E	—	<u>?</u> .	- R.S.
	Sarasota		, Florida 34240 🔀	즲
	(City)		(Zip code)	Ö
10. Registered as	gent'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.

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: Michael Davis	72 (M) -6 PH 12: 20
Address: 271 South Matanzas Blvd., Saint Augustine, Ga. 32080	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Michael Davis	
Address: 271 S. Matanzas Blvd.	
Saint Augustine, Fl. 32080	
Vice President:	
Address:	
Secretary: Kathie M. Davis	
Address: 271 S. Matanzas Blvd. Saint Augustine, Fl. 32080	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional of	Ticers and/or directors.
13. Michael Davis Michael Davis Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 above) affir are true and that he or she is aware that false information submitted in a document to the I third degree felony as provided for in s.817.155, F.S.	
Michael Davis, President	

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

LTT ENTERPRISES, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 10/23/1985 in Georgia. 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 above-named 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 4th day of May, 2012

B:Ph

Brian P. Kemp Secretary of State

Certification Number: 9050414-1 Reference:
Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp

SECHLTARY OF STATE
JIVISION OF CORPORATIONS

12 MAY -8 PM 12: 20