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Certified Copies	Certificates	s of Status
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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: HDA Architects 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," or "Certificate of Good Standing" 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:
Name of Person  HDA ACCHECTS INC  Firm/Company
SMULL Address  City/State and Zip code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PETER HILL at (106) 531-999 &  Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA REGISTER A FOREIGN CORPORATION TO TRANSACT	STATUTES, THE FOLLOWING IS SUBMITTED TO
1 HDA Architects Inc	
(Enter name of corporation; must include "INCORPORATED" Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp.")	
200, 00 Corp. )	
Of account (IA)	
(If name unavailable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
2. (State or country ander the law of which it is incorporated)	-46-5639374
(State or country ander the law of which it is incorporated)	(FEI number, if applicable)
4. 05 13 2014 5	
(Date of incorporation)	(Date of duration, if other than perpetual)
6	
(Date first transacted business i	n Florida, if prior to registration) 502, F.S., to determine penalty liability)
	- 1
	DWSINVILLE, GA-30534 pal office address)
(, , , , , , , , , , , , , , , , , , ,	pu onito addicas)
(Current maili	ng address, if different)
	ALCO THE
8. Name and street address of Florida registered agent: (P.o.	O. Box NOT acceptable)
Name: URS Agents, LU	1 SS 8
Office Address: 3458 La Keishore	Dr Page 3 C
Tallahassee	- 2010 SE SE
(City)	, Florida(Zip code)
Registered agent's acceptance:	(,
Having been named as registered agent and to accent servi	or of process for the above send
	HART OF BERTSTEVEN COMMENT AND ASSESSED AS A SECOND OF THE SECOND
urther agree to comply with the provisions of all statutes r luties, and I am familiar with and accept the obligations o	Elative to the proper and complete medamics
URS Agents, LLC	my position as registered agent
$\Lambda_{i}$	
	Eubanks, Assistant Secretary
(Registered a	gent's signature)

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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Peter J. Hill Sv
Address: 413 Beck Lane
Address: 413 Beck Lane Dawsonville GA 3053+
Vice Chairman:
Address:
-10 to
Director: Peter J. Hill SR
Address: 43 Beck Lane
Address: 43 Beck Lane Dawsnulle, GA 30534
Director:
Address:
B. OFFICERS
President: PETER J. HILL SR
Address: 413 BCK Lane
Dawsonville, GA 30534
Vice President:
Address:
Secretary: Jim Berayn
Address: 413 Pack Lane Dawsmyle, GA 30534
Treasurer: Chris Nunc
ddress: 43 Blck Lane Jawson VIII, 6A 30534
OTE: If necessary you may attach an addenguip to the application listing additional officers and/or directors.
Ple HUTHE
Signature of Director or Officer e officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein
true and that he or she is aware that false information submitted in a document to the Department of State constitutes
ird degree felony as provided for in s.817.155, F.S.
(Typed or printed name and capacity of person signing application)

## STATE OF GEORGIA

**Secretary of State** 

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



#### CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

> HDA Architects, Inc. a Domestic Professional Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below 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 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.

> Docket Number : 16590263 Date Inc/Auth/Filed: 05/13/2014 Jurisdiction : Georgia Print Date : 01/31/2019

Form Number : 211



Brad Raffensperger

**Brad Raffensperger** Secretary of State