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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone i	#)
PICK-UP	 WAIT	MAIL
(Bu	siness Entity Name	∋)
(Do	cument Number)	
Certified Copies	_ Certificates of	of Status
Special Instructions to	Filing Officer:	
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	Office Use Only	\mathcal{M}^{\sim}



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TRANSMITTAL LETTER

TO: Registration Se Division of Co		*	
SUBJECT: FIRST S	SOUTH PROPERTIES USA	A, INC.	
	(Name of corpora	ation - must include suffix)	
Dear Sir or Madam:			
	e", and check are submitted t	or Authorization to Transact B to register the above referenced	
Please return all corresp	ondence concerning this mat	ter to the following:	
THOMAS B. CROWS	ON		gan.
	(Name	of Person)	
FIRST SOUTH PRO	PERTIES USA, INC.	; <u></u>	
	(Firm/	Company)	25
P.O. BOX 14280	·		
	(A	ddress)	हिंद य
GREENSBORO, NOR	TH CAROLINA 27415		
	(City/Sta	te and Zip code)	0:10
For further information	concerning this matter, pleas	e call:	<u></u>
THOMAS CROWSON	at (336	271-8700	
(Name of Person		ea Code & Daytime Telephone	Number)
STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399	ıs	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	\$78.75 Filing Fee & (2) Certificate of Status	☐ \$78.75 Filing Fee & ☐ Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy
	= #87.50		· ·

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.

(Enter name of	corporation; must include "INCORPO Corp," "Inc," "Co," or "Corp.")	DRATED," "COMPANY," "C	ORPORATION,"	•	<u> </u>
(If name unava	ilable in Florida, enter alternate corpo	rate name adopted for the purpo	se of transacting b	ousiness in Floric	ia)
2, NORTH CA	POT INA	3. 20-0519409			
	y under the law of which it is incorpor		number, if applica	ıble)	<u> </u>
4 1/1/2004	•	5. PERPETUAL		•	
·· ———	te of incorporation)	(Duration: Year con	rp. will cease to ex	ist or "perpetual"	")
6. UPON QUAI	IFICATION				
	acted business in Florida. If corporati	on has not transacted business i	n Florida, insert "r	non qualificatio	n.")
	(SEE SECTIONS	607.1501, 607.1502 and 817.13	55, F.S.)	AALL FCC	
7. 3129 CEDA	R PARK ROAD, GREENSBORG	office address)	103 +.		
P.O. BOX 14	280, GREENSBORO, NORTH			ASSET	**************************************
8. Real estate	(Current m acquistion/development/dis	ailing address) position/construction; u	nderground ui	ility constru	***************************************
(Purpose	(s) of corporation authorized in home	state or country to be carried ou	it in state of Florid	a) 🖰 😊	
9. Name and <u>st</u>	reet address of Florida registered	agent: (P.O. Box or Mail I)rop Box <u>NOT</u> a	cceptable)	
Name:	WILLIAM T. STOVER	<u>** 、 次基準 、 </u>	e e talak		` -,-
Office Address:	1401 NE STREET	See 1	a 4 a - 2 a - 2 a - 2		·
	POMPANO BEACH	, Florida_ 330	60 .		
	(City)	(Z	ip code)		
Having been na designated in th further agree to	agent's acceptance: med as registered agent and to acc is application, I hereby accept the comply with the provisions of all s ar with and accept the obligations	appointment as registered a tatutes relative to the proper	gent and agree to r and complete p	o act in this ca	pacity. I

- 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: WILLIAM T. STOVER Address: _P.O. BOX 14280 GREENSBORO, NC 27415 Vice Chairman: Address: _ Director: WILLIAM T. STOVER Address: P.O. BOX 14280 GREENSBORO, NORTH CAROLINA 27415 Director: _ Address: _ **B. OFFICERS** President: THOMAS B. CROWSON Address: P.O. BOX 14280 GREENSBORO, NORTH CAROLINA 27415 Vice President: Address: _ Secretary: _ Address: _ Treasurer: Address: 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) 14. THOMAS B. CROWSON, PRESIDENT

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



State of North Carolina Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

FIRST SOUTH PROPERTIES USA, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 1st day of January, 2004, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State, if applicable; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 25th day of February, 2004.

6 laine I. Marshall

Secretary of State

Certification Number: 8046908-1 Page: 1 of 1 Ref.# 5888121-ea Verify this certificate online at www.secretary.state.nc.us/Verification.