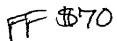
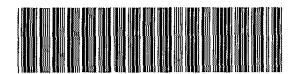
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### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 19, 2004

DEBBIE BEVIN P.O. BOX 28365 RALEIGH, NC 27611

SUBJECT: CIRCA NORTH CAROLINA, INC.

Ref. Number: W04000011100

We have received your document for CIRCA NORTH CAROLINA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign and return your check along with this document in order to complete your filing.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 804A00018347

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## TRANSMITTAL LETTER

TO:	Registration Sec Division of Corp	rporations	4
SUBJI	ECT:	Circa North Carolina, Inc. (for use in Florida by Circa	ulne
		(Name of corporation - must include suffix)	,
Dear Si	r or Madam:		
"Certifi	closed "Application icate of Existence t business in Flori	tion by Foreign Corporation for Authorization to Transact Business in Florida", e", and check are submitted to register the above referenced foreign corporation to rida.	
Please	return all correspo	condence concerning this matter to the following:	
		Debbie Bevin	
*****		(Name of Person)	
		Circa, Inc.	
		(Firm/Company)	
		PO Box 28365 (Address)	
		(Address)	
		Rajeigh NC 27611 Es E	
		Raleigh NC 27611 Zin	
	er street in		•
For fur	ther information of	concerning this matter, please call:	
	<u>Debbie Bevi</u>	10 at (919) 834 - 4757	
	(Name of Perso	on) (Area Code & Daytime Telephone Number)	
		,	
Registr Divisio 409 E.	ET ADDRESS: ration Section on of Corporations Gaines St. assee, FL 32399	P.O. Box 6327	
Enclos	ed is a check for t	the following amount:	
\$70	.00 Filing Fee	☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status	

## 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. Circa Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
Circa North Carolina, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. North Carolina 3. 56-2245542
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 3/16/01 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 608 W. Johnson St. Suite 9, Raleigh NC 27603
(Principal office address)
PO Box 28365 Raleigh, NC 27611
(Current mailing address)
8 Cultural Resources Consulting
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
Name: Diane Alperin
Office Address: 3130 Lowson Blvd.
Delvay Beach, Florida 33445
Delvay Beach, Florida 33445 (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.
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my dut
and I am familiar with and accept the obligations of my position as registered agent.
1 Ison of Olomoria
(Registered agent's signature)
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application

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: April Montgomery		<u></u> .	
Address: 19 N. Gulf St.		<del></del>	
Sanford NC 27330			
Director: Ellen Turco			
Address: 214 W. Pine Ave.			
Wave Forest, NC 27587			
B. OFFICERS			
President: April Montgomery	<u> </u>	<u> </u>	
Address: See above	A	-33	
Audiess	- RESSE	្នាំ	===
Vice President: Ellen Turco		77	8
Con obusta		<del></del>	
Address: Sel WOOVS	<del>```</del>		
Secretary: Ellen Turco		,	
Address: See above			
Treasurer: April Montgomeny	<del></del>		
Address: SLL OWOVL	<del></del>		
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	and/or directo	rs.	
13. Sail Malowe >	·		
(Signature of Director or Officer listed in number 12 of the application)			
14. April Montgomery President  (Typed or printed name and capacity of person signing application)			
(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, Sccretary of State of the State of North Carolina, do hereby certify that

## CIRCA, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 16th day of March, 2001, 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 19th day of February, 2004.

6 laine A. Marshall

Secretary of State

Certification Number: 8034678-1 Page: 1 of 1 Ref.# 5881394-cs
Verify this certificate online at www.secretary.state.nc.us/Verification.