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To: Qualification/Tax Division of Corp		-		·			
SUBJECT:	MANAGEMENT C	o RPO RA	T10N				
30bbc1	(Name of co	rporation	- must include suffix)			\$ "	
Dear Sir or Madam:							
The enclosed "Application "Certificate of Existence" to transact business in Flories	", and check are subm	tion for A itted to <u>r</u> e	uthorization to Transac gister the above referen	t Business in ced foreign c	Florida", orporatio	, D	
Please return all correspo	ondence concerning th	is matter t	o the following:				
AL	AN BRANDS					** s	
	AN BRANDS	Name of I	Person)				
Tet	MANAGENT						
TSI	MANAGEMENT (Firm/Com	ipany)		т. ж		2
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Should you need to call	someone concerning the	nis matter	, please call:				
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(Name of Perso	at (_	47•	ode & Daytime Telepho	one Number)	NS A	00	
(Name of Perso	n <i>)</i>	(Alca C	oue & Dayamo Totopia		LAHASS	00 JAN 26	APP PER PER PER PER PER PER PER PER PER PER
STREET ADDRESS:			MAILING ADDRES	S:			
Qualification/Tax Lien S Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399			Qualification/Tax Lier Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ons	STATE		C
Enclosed is a check for t	the following amount:						
\$70.00 Filing Fee	☐ \$78.75 Filing Fee Certificate of Sta	-	\$78.75 Filing Fee & Certified Copy		Filing Fed cate of St ed Copy		;
				Ì	741	\mathcal{D}	

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.

(Name of corporation; must include the word in the old Theory in the old Theory words or abbreviations of like import in language as will clearly indicate that it is a corporation instructural person or partnership if not so contained in the name at present.)	
2 GEORGIA 3. 58-2213418	
2. GEORGIA (State or country under the law of which it is incorporated) 3. 58-2213418 (FET number, if app	licable)
4. DECEMBER 28/1995 5. PERPETURE (Date of incorporation) (Duration: Year corp. will cease to exist	or "perpetual")
	The second secon
6. JANNALY 31, 2000 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.15	5, F.S.)
	=
7. 3440 OAKELIFF ROAD, SUITE 104	
ATLANTA, GA 30340 (Current mailing address)	
(Current mailing address)	· · · · · · · · · · · · · · · · · · ·
8. DEUELOP HIGH END MOUTINEDIA AND USUAL COMMUNICATIONS (Purpose(s) of corporation authorized in home state or country to be carried out in state of Fl	orida) TALLO JA
	OT acceptable 元 コン
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box No.	OT acceptable 72 72 72 72 72 72 72 72 72 72 72 72 72
	OT acceptable 72.6
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box No.	OT acceptable ASSEE, FLORING
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box No. Name: START REESE Office Address: 416 EAST GEORGIA ST	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box No. Name: START REESE	

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.

(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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)
Chairman: Phillip M. Ingram
Address: SIS FARthingale Court
Alphanetta, GA 3002Z
Vice Chairman: Michael Mc Govern
Vice Chairman: Michael Mc Govern Address: 5910 Long Island Drive, NW
Atlanta, 6A 30828
Director: Howell Upchusch
Address: 2710 Brook Park Way
Doraville, GA 30340
Director: David N. LoGAN
Address: 155 Hunters Cove
Roswell, 6A 30076
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: Phillip M. Jugram
Address: 515 Farthingale Ct.
Alpharetta GA 30022
Vice President:
Address:
Sam -
Secretary: David N. Logan
Address: 155 Hunters Cove
Roswell, BA 20076
Treasurer:
Address:
The state of the s
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Phillip M. Ingram, Pacsident + CEO (Typed or printed name and capacity of person signing application)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 000190351
CONTROL NUMBER : K600030
DATE INC/AUTH/FILED: 12/28/1995
JURISDICTION : GEORGIA
PRINT DATE : 01/19/2000

FORM NUMBER : 211

TSI MANAGEMENT CORPORATION ALAN BRANDS 3440 OAKCLIFF RD STE 104 ATLANTA, GA 30340

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

TSI MANAGEMENT CORPORATION A DOMESTIC PROFIT CORPORATION

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

OD JAN 26 AM II: II
SECHETARY OF STATE
TALLAHASSEE



Cathy Cox Secretary of State