# F-0000000000943

_	IRANSMITIA	LLETTER				
To: Registration Section Division of Corpora						
SIDECT. G. L	AYCOCK. TIC					
SUBJECT: G. L	(Name of corporation	n - must include suffix)				
Dear Sir or Madam:						
	by Foreign Corporation for And check are submitted to re	egister the above referenced	l foreign corporation to			
Please return all correspond		to the following:	]031404675 -02/18/0001106008 ******70.00 *****70.00			
GEOG	IGE LAYCOCK	ŧ	-			
	CGE LAYCOCK (Name of	Person)				
G. l	-AY COCK INC. (Firm/Cor					
***************************************	(Firm/Con	mpany)				
8505	CANEY CREEK	LANDING	<del>-</del>			
	CANEY CREEK (Addr	ress)				
ALPU	ARETTA GA. 3	0005	00 SEC			
	ARETTA, GA. 3 (City/Sta	te/Zip)				
			ASSS = 8			
Should you need to call son	neone concerning this matter	r, please call:	FILED FEB 18 MIT RETARY OF STAINASSEE, FLO			
MARY KEIFT		) 442-5527	D MITH: 04 FSTATE FLORIDA			
(Name of Person) (Area Code & Daytime Telephone Number)						
			mh			
STREET ADDRESS:		MAILING ADDRESS:	2/22			
Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		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 & Certificate of Status	\$78.75 Filing Fee & Certified Copy	J \$87.50 Filing Fee, Certificate of Status & Certified Copy			

## 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.	G. LAYEOCK, INC.						
	(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or						
	words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a						
	natural person or partnership if not so contained in the name at present.)						
	GEORGIA  (State or country under the law of which it is incorporated)  (FEI number, if applicable)						
	(State or country under the law of which it is incorporated) (FEI number, if applicable)						
4.	3-13-1998 5						
	(Date of incorporation) 5. (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 qualificat (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)							
	· · · · · · · · · · · · · · · · · · ·						
7.	a. 8505 CANEY CREEK LANDING, ALPHARETTA, GA 30005 (Principal office address)						
	$\succ$						
	b. SAME						
(Current mailing address)							
	GENERAL CONTRACTING						
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)						
	(= m-k + + + + + + + + + + + + + + + + + + +						
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)						
	Name: GEORGE LAYCOCK						
O	ffice Address: 14410 Falmwood Road # 33A						
	PALM BEACH GARDENS, Florida 33410 (Zip code)						
	(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. 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.

<sup>11.</sup> 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:	<del> </del>		
Address:			_
	<u></u>		1
Vice Chairman:			<del>_</del>
Address:			_
Director:			
Address:		·-	
Audioss.			
Director:			
Address:			
Address:	7,00		<del></del>
B. OFFICERS			<del></del>
President: George Laycock	FEB I		<del>-</del>
President: George Laycock  Address: 8505 Chney Creek Lynding  Alphanetla, 64 30005	RY O	<u></u>	
Alphanetla, GA 30005	- ST N	<u> </u>	<u></u> -
Vice President:	A PAGE		·
Address:			
Secretary:			·
Address:			
Address.			
Treasurer:			
Address:		- · · · · <del>- · ·</del>	
	4		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or			
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	lication)		1
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app 14. Ceorge hayevest President  (Typed or printed name and capacity of person signing application)			· 
(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 : K93471162
CONTROL NUMBER : K810933
DATE INC/AUTH/FILED: 03/13/1998
JURISDICTION : GEORGIA
PRINT DATE : 12/13/1999
FORM NUMBER : 211

G. LAYCOCK, INC.
G. LAYCOCK
8505 CANEY CREEK LANDING
ALPHARETTA, GA 30005

### 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

G. LAYCOCK, INC.
A DOMESTIC PROFIT CORPORATION

SECRETARION IZED

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 Georgian 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.



Cathy Cox

Secretary of State