

F00000002130

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Little River House, 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", 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: 300003175573--6
-03/20/00--01078--010

Sherrie B. Boone

(Name of Person)

Little River House, Inc.

(Firm/Company)

25716 Powell Dr

(Address)

Astor, FL 32102

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Sherrie B. Boone at (352) 759-2010

(Name of Person)

(Area Code & Daytime Telephone Number)

Name	<u>3/23/00</u>
Availability	<u>dec</u>
Document Examiner	<u>DEC</u>
Update	<u>Qualification/Tax Lien Section</u>
Update	<u>Division of Corporations</u>
Verify	<u>409 E. Gaines St.</u>
Verify	<u>Tallahassee, FL 32399</u>
Amount	<u>Enclosed is a check for the following amount.</u>
W. F. V.	<u>\$70.00 Filing Fee</u>

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

- ☒ \$78.75 Filing Fee & Certificate of Status
☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

FILED
00 APR 18 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5 pages

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825.647.671

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FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 23, 2000

SHERRIE B. ^BGOONE
LITTLE RIVER HOUSE, INC.
25716 POWELL DR
ASTOR, FL 32102

SUBJECT: LITTLE RIVER HOUSE, INC.
Ref. Number: W00000007801

We have received your document for LITTLE RIVER HOUSE, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 900A00016152

**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. Little River House, Incorporated
(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.)

2. Georgia 3. 58-2199351
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8-29-95 5. —
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 3-3-00
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 25716 Powell Drive
Astor, FL 32102
(Current mailing address)

8. retail sales
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Daniel Boone

Office Address: 25716 Powell Dr.
Astor, Fla Florida, 31201
(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.

Daniel E Boone
(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.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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TALLAHASSEE, FLORIDA

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Sherrie Boone
Address: 25716 Powell Dr.
Astor, FL 32102

Vice Chairman: Daniel Boone
Address: 25716 Powell Dr
Astor, FL 32102

Director: Sherrie Boone
Address: Same

Director: Daniel Boone
Address: Same

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Sherrie Boone
Address: 25716 Powell Dr
Astor, FL 32102

Vice President: Daniel Boone
Address: 25716 Powell Dr
Astor, FL 32102

Secretary: Daniel Boone
Address: Same

Treasurer: Daniel Boone
Address: Same

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TALLAHASSEE, FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Sherrie B. Boone
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Sherrie B. Boone - President
(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 : 000940007
CONTROL NUMBER : K526384
DATE INC/AUTH/FILED: 08/29/1995
JURISDICTION : GEORGIA
PRINT DATE : 04/03/2000
FORM NUMBER : 211

LITTLE RIVER HOUSE, INC.
SHERRIE B. BOONE
4629 SOUTH STRATFORD OAKS DR
MACON, GA 31210

CERTIFICATE OF EXISTENCE

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

LITTLE RIVER HOUSE, INC.
A DOMESTIC PROFIT CORPORATION

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TALLAHASSEE, FLORIDA

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 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.



Cathy Cox

Cathy Cox
Secretary of State