

Division of	Corporations
SUBJECT:	J.A. LONG, ING.
	(Name of corporation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application of Existe transact business in F	cation by Foreign Corporation for Authorization to Transact Business in Florida", nce", and check are submitted to register the above referenced foreign corporation to lorida.
Please return all corre	espondence concerning this matter to the following:
	Robert A. TILLERY (Name of Person)
	(Name of Person)
	J. A. LONG, INC 50000321127520192 *****78.75 *****78.75 (Firm/Company)
	(Firm/Company)
	[Address]
	(Address)
	GAINES VICLE, GA 30503 (City/State/Zip)
	(City/State/Zip)
	W + 06/2
Should you need to ca	Il someone concerning this matter, please call:
Robert A.	Son) at (770) 532 4322 Es 8 W 5/25
(Name of Per	son) (Area Code & Daytime Telephone Number)
STREET ADDRESS	MAILING ADDRESS:
_	The state of the s
Registration Section	Registration Section Section
Division of Corporatio	Division of Corporations
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327
runanassee, FL 32395	Tallahassee, FL 32314
Enclosed is a check for	the following amount:
□ \$70.00 Filing Fee	▼ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy
900 A00	030/02



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 21, 2000

ROBERT A. TILLERY J.A. LONG, INC. PO BOX 1035 GAINESVILLE, GA 30503

SUBJECT: J.A. LONG, INC. Ref. Number: W00000010612 OO HAY 26 AM 9: 50

We have received your document for J.A. LONG, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 100A00022148

RESOLUTION OF BOARD OF DIRECTORS (Please print or type)

I the undersigned	JAMes	A. Long	, do hereby certif	fy	The second
I, the undersigned	()	ame)		1. 1	
that this Resolution o	of the Board of D	irectors of			
<u>J.</u>	A.Loue (Corpo	rate Name)		and the second s	- * · · · · · · · · · · · · · · · · · ·
		sting under the laws of	the State of Ga	,	on the second
was duly adopted on	MAY 23		,20,00		45 - 04
*		(Corporate Name		, 	
organized and existi	ng in the State o	(GEORGIA	, hereby adopts th	le name	
J.A.Lon	g Inc e	or Georgi	for use ir	1 Elefida = -	
		,		SSEE OF	П
Dated: 5-23.	-2.000		e garage	9: 50 STATE	. <u> </u>
	Signature of either	Chairman, Vice Chairman	or any officer		ts z mb L · 克····普勒A
		• • • • • • • • • • • • • • • • • • • •			- je do staju i n eg tumustima naji
	4.6	Type or print Name		to the second second	- 1

INHS19(1/00)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

THE FOLLOWING IS SUBMITTED TO	
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. J. A. LONG, INC.	
Oxame of compression; must include the word "INCORPORATED", "COMPANY", "CORPORATION of	
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.)	
•	
(81544943	
2. Grant or country under the law of which it is incorporated) 3. SB 15 44 94 3 (FEI number, if applicable)	
4. (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual")	. ,
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6. (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.)	
2 /2 / Chan / 1 / 1 / 1 / 2 / 3 / 3 / 3 / 3 / 3 / 3 / 3 / 3 / 3	
7. a. 341 Bradford Street Cosines Ville, GA 305017 [Principal office address) b. 10. Sox 1035, GDINES VILLE, GA 30503 [Principal office address) (Current mailing address)	
(Principal office address)	
PO SOX 1035 GDINESVILLE GA 30503 500	
(Current mailing address)	
· .	
8 CONSTRUCTION FOR PROFET	
8. (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	, — <u> </u>
• •	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
·	
Name: CURTIS L. WATSON	
100 miles and Rel	
Office Address: 1580 WATSON Rd	- -
1014 Florida 32565	
	. 77
(Zip code)	
10. Desistand agent's accontance	
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 configuration. I beraky account the appointment as registered agent and agree to act in this capacity. I juriner agree to	
comply with the provisions of all statutes relative to the proper and complete performance of my auties, and I am jumitar with	
and accept the obligations of my position as registered agent.	
Custis L. Wation	
(Registered agent's signature)	•
(Vekistered akeur 2 sikuarma)	

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. DIRECT Chairman: _	LANG ASONG	JAMES A. LONG
Address:	01	679 TOHMY AARON DR
	GAMENTE GA 36603	GAINESVILLE, GA 30506
ice Chairm	an:	
.ddress:		
	DOMOCE COIN	DONALD CAIN
.ddress:		SG25 OSCAR GILSTRAD Rd.
,,	Garnes VICCC, GA 30503	-GAINESVICTE, GA-30527-
	SUSAN CAST NEL	SUSBN CASTNER
.ddress:	P.O. DROWER 937	983 LAKEMONT DR NI
_	GATHESVILLE, GA 50503	GAINESVILLE GA 305
. OFFIC	0 4	21 -1 -
	Baban A. Incary	Robert A. TILLERY
ddress:	P.O. BOX 1035	405 WESTHOLECAND Rd.
	GAINESVILLE GA 30503	
ice Preside	ent: Destated Corn	DOMALD COIN
ddress:	D.O. Dok 1035	5625 OSCAR GILSTRAP
	garnesvice, 6,4 30503	GAINESVILLE, GA 30527
ecretary: _		
.ddress:		TAL SE
_		
reasurer: _		
ddress:		
		FLORIDE TO THE STATE OF THE STA
OTE: If	necessary, you may attach an addendum to the application listing	g additional officers and/or directors.
3. <u> </u>	a Sully	10.61
	(Signature of Chairman, Vice Chairman, or any officer liste	
4	Robert A. Ticcery Pre	erson signing application)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 000630888

CONTROL NUMBER : J400392

DATE INC/AUTH/FILED: 01/19/1984

JURISDICTION : GEORGIA

PRINT DATE : 03/03/2000

FORM NUMBER : 211

J.A. LONG, INC. JAMES A. LONG POB 1035 GAINESVILLE, GA 30503

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

J. A. LONG, INC. 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.



Cathy Cox Secretary of State