

# FO0000004056

**TRANSMITTAL LETTER**

To: Registration Section  
Division of Corporations

SUBJECT: Medley Restaurant Equipment & Supply Co., 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: **300003329263--9**  
-07/20/00--01008--022  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Ronda I. Bailey  
(Name of Person)  
Medley Restaurant Equipment & Supply Co., Inc.  
(Firm/Company)  
P.O. Box 328  
(Address)  
Albany, GA 31702  
(City/State/Zip)

RECEIVED  
00 JUL 20 AM 10:38  
DIVISION OF CORPORATION  
FILED  
00 JUL 20 AM 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
*9/20*

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

Ronda I. Bailey at ( 912 ) 432-5116  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

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

*will wait*

### 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. Medley Restaurant Equipment & Supply Co., 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.)

2. Georgia (State or country under the law of which it is incorporated)      3. 58-2350993 (FEI number, if applicable)

4. 10/27/97 (Date of incorporation)      5. Perpetual (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. a. 424 Roosevelt Ave., Albany, GA 31701  
(Principal office address)

b. P.O. Box 328, Albany, GA 31702  
(Current mailing address)

8. distribution of commercial restaurant equipment and supplies  
(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: John Charles Denson

Office Address: 3370 Capital Circle, NE, Suite C2,  
Tallahassee, Florida 32308  
(Zip code)

**FILED**  
JUL 20 AM 10:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.*

*John Charles Denson*  
(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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: W. David Campbell

Address: 2400 West Doublegate Drive

Albany, GA 31707

Vice President: S. Reed Jackson

Address: 3709 Hidden Hills Court

Albany, GA 31707

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. [Signature]  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. S. Reed Jackson, VICE PRESIDENT  
(Typed or printed name and capacity of person signing application)

FILED  
00 JUL 20 AM 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

DOCKET NUMBER : 001960583  
CONTROL NUMBER : K737911  
DATE INC/AUTH/FILED: 10/27/1997  
JURISDICTION : GEORGIA  
PRINT DATE : 07/14/2000  
FORM NUMBER : 211

MEDLEY RESTAURANT EQUIPMENT & SUPPLY CO.  
ATTN: RONDA BAILEY, CONTROLLER  
P.O. BOX 328  
ALBANY, GA 31702

**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

**MEDLEY RESTAURANT EQUIPMENT & SUPPLY CO., 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 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.



A handwritten signature in black ink, appearing to read "Cathy Cox".

Cathy Cox  
Secretary of State