FOODPORTAL LATTER 4/30

To: Registration Section Division of Corporations
SUBJECT: Pro Solve, Suc. D/B/A The Honogloched Herri Co. (af (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:
Mrs Paul A. Bornelie
Mr. Paul A. Bowers (Name of Person)
Pro Solve, Suc. 9000033333339-5 (Firm/Company) 9000033333339-5 *****70.00 ******70.00
(Firm/Company)
(Address) Laurenceville, Mer 30043 (City/State/Zip)
(Address)
Caurerceville, Su 30043
(City/State/Zip)
Z _v o
Should you need to call someone concerning this matter, please call:
Paul Bowers at (770) 338-0639
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Registration Section Division of Corporations Division of Corporations Division of Corporations P.O. Poy 6327
409 E. Gallies St. F.O. Box 0327
Tallahassee, FL 32399 Tallahassee, FL 32314
Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount:
3 \$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

	· • • • • • • • • • • • • • • • • • • •
I, the undersigned Paul A. Bowers , do hereby certify (Name)	
that this Resolution of the Board of Directors of Pro Solve, Que,	: . •
(Corporate Name)	
a corporation duly organized and existing under the laws of the State of,	
was duly adopted on July 24 , 19 2000	
Be it resolved, that Pro Solve, Juc., (Corporate Name)	
A +	
organized and existing in the State of State of FA, hereby adopts the name	-
The Honey balod Ham Co. E. Cafe, Inc. for use in Florida.	- - ±
Dated: 7-24-2000	.
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Signature of either Chairman, Vice Chairman or any officer	er an af eller on your consense.
Paul Bowers Type or print name	
Make checks payable to Florida Department of State and mail to:	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	6

INHS19(9/98)

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	<u> </u>
Address:	
Jice Chairman:	
/ice Chairman:	
Address:	
Director:	
Address:	
irector:	
ddress:	
. OFFICERS	
esident: Youl A. Bowers sn	
ddress: 1344 Clucuter Club CA	
Laurenceville, Du 30043	·
ce President:	
ldress:	
	S
eretary: Many K. Bowers	2500
dress: 1344 Charter Club Ct	827
·	
asurer:	57 5
dress:	V1
TE: If necessary, you may attach an addendum to the application listing additional o	fficom on dian diagram
	incers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number	12 of the application)

(Typed or printed name and capacity of person signing application)

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. Pro Solve, 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	-
notived param or partnership if not as contained in the name at present)	
FOERAL TAX TO # (?))
2. CEOR G7 A (State or country under the law of which it is incorporated) 3. 58-2317492 (FEI number, if applicable)	
4. November 1, 1997 (Date of incorporation) 5. ERPETUAL (Duration: Year corp. will cease to exist or "perpetual")	
~	
6. OPON QUACIFICATION (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. 1344 Charter Club Ct. Laurenceville, Su 3004. (Principal office address)	3
b. SPME AS 7-a (Current mailing address)	. MS
(Current mailing address)	
· For Drolt Commercial Ret 1 SALER	
8. For Profit Corporation. Refail SACES (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: Dr. K.D. Bowers III	. :=: :
Office Address: 618 FAIRWAY Drive	
Office Address: 418 / MICO/10 Street	
Ft. Walton Beach, Florida 32547 (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 designate 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.	
LATI BOLL	****** *

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.

(Registered agent's signature)

Secretary of State

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

DOCKET NUMBER : 001940550 CONTROL NUMBER : K736886 DATE INC/AUTH/FILED: 10/14/1997 JURISDICTION : GEORGIA

: 07/12/2000

FORM NUMBER : 211

PRINT DATE

PRO SOLVE, INC.
PAUL A. BOWERS
1344 CHARTER CLUB CT
LAWRENCEVILLE, GA 30043

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

PRO SOLVE, 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