

CT CORPORATION SYSTEM

F02000000420

CORPORATION(S) NAME

XcellentEvents, Inc.

FILED
02 JAN 25 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger	RECEIVED 02 JAN 25 AM 11:32 SECRETARY OF STATE TALLAHASSEE, FLORIDA
<input type="checkbox"/> Nonprofit			
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark	
	<input type="checkbox"/> Reinstatement		
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other	
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA	
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC	
	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS	
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up	
<input type="checkbox"/> Mail Out			

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

1/25/02

(Handwritten signature/initials)

Order#: 5069884 **BK**

000004798350--7

-01/25/02--01058--019

Ref#: *****78.75 *****78.75

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**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*

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TALLAHASSEE, FLORIDA
STATE

1. XCELLENTEVENTS, 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 3. 58-2589333
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 1, 2001 5. Perpetual
(Date of incorporation) (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. 1435 Hill Place, Atlanta, Georgia 30318
(Principal office address)
1435 Hill Place, Atlanta, Georgia 30318
(Current mailing address)
- For any lawful purpose
8. _____
(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: C T Corporation System
- Office Address: 1200 South Pine Island Road
Plantation Florida 33324
(City) (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.

C T Corporation System

Cornelia B. Bogan

(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: See attached officers/directors rider

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached officers/directors rider

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. John W. Rosenquist, Executive Vice President
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

**OFFICERS/DIRECTORS RIDER
TO
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA
OF
XCELLENTEVENTS, INC.**

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Director: Stephen Brown
Address: 1435 Hill Place
Atlanta, Georgia 30318

Director: Jim Proctor
Address: 1435 Hill Place
Atlanta, Georgia 30318

Director: Harry Speros
Address: 1435 Hill Place
Atlanta, Georgia 30318

Director: John W. Rosenquist
Address: 1435 Hill Place
Atlanta, Georgia 30318

B. OFFICERS

President: Terry DeFeo
Address: 1435 Hill Place
Atlanta, Georgia 30318

Exec.Vice President: John W. Rosenquist
Address: 1435 Hill Place
Atlanta, Georgia 30318

Secretary: Stephen Brown
Address: 1435 Hill Place
Atlanta, Georgia 30318

Treasurer: John W. Rosenquist
Address: 1435 Hill Place
Atlanta, Georgia 30318

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

CONTROL NUMBER : 0100038
DATE INC/AUTH/FILED: 01/01/2001
JURISDICTION : GEORGIA
PRINT DATE : 01/22/2001
FORM NUMBER : 211

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02 JAN 25 PM 12:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORPORATION SYSTEM
DANNY VERDECCHIA
1201 PEACHTREE STREET, N.E.
ATLANTA, GA 30361

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 as of the above print date

XCELLENTEVENTS, INC.
A GEORGIA PROFIT CORPORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date 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 print date above. 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 information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and 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.

20020122202502674



Cathy Cox

Cathy Cox
Secretary of State

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TALLAHASSEE, FLORIDA