

FO2000000821

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S & A Services of Marion, LTD.
(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:

Kathryn Freeman

(Name of Person)

Cornerstone Support, Inc.

(Firm/Company)

16 Norcross St. Suite 101

(Address)

Roswell, GA 30075

(City/State and Zip code)

FILED
02 FEB 14 PM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

900004834619--2
-01/30/02--01005--021
*****78.75 *****78.75

Kathryn Freeman
(Name of Person)

at () 770-587-4595
(Area Code & Daytime Telephone Number)

W02-3135

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



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 4, 2002

KATHRYN FREEMAN
16 NORCROSS ST., STE 101
ROSWELL, GA 30075

SUBJECT: S & A SERVICES OF MARION LTD
Ref. Number: W02000003135

We have received your document for S & A SERVICES OF MARION LTD 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 corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6097.

Michael Mays
Document Specialist

Letter Number: 302A00006725

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE 97TH SECTION 60 7.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. S & A Services of Marion, LTD., 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. Indiana

(State or country under the law of which it is incorporated)

3.

11-3626750

(FEI number, if applicable)

4. 6/13/2001

(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. 702-704 S. Adams Street

Marion IN 46952

(Principal office address)

(Current mailing address)

8. Debt Collection

(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: LEXIS Document Services Inc.

Office Address: 3953 W. W. Kelley Road

Tallahassee

(City)

, Florida 32311

(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.

Karen Stephenson, Asst. Secy
(Registered agent's signature)

I 1. 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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Suzanne Schreiber

Address: 702-704 S. Adams Street

Marion, IN 46592

Vice Chairman: _____

Address: _____

Director: Jeffery Schreiber

Address: 702-704 S. Adams Street

Marion, IN 46592

Director: William Kwiatak

Address: 702-704 S. Adams Street

Marion, IN 46592

B. OFFICERS

President: Suzanne Schreiber

Address: 702-704 S. Adams Street

Marion, IN 46592

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: Suzanne Schreiber

Address: same as above

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TALLAHASSEE, FLORIDA

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

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

14. Suzanne Schreiber President
(Typed or printed name and capacity of person signing application)

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greeting:

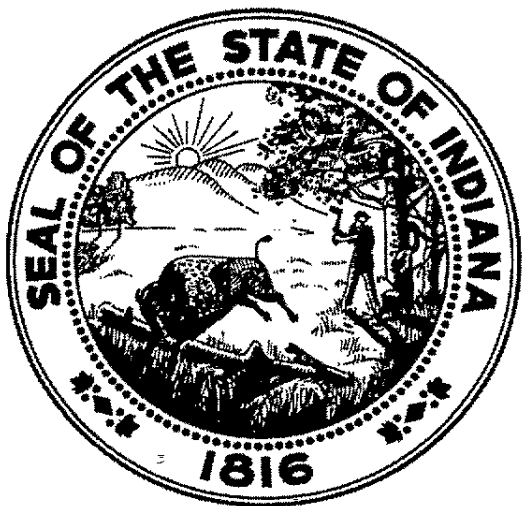
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

S&A SERVICES OF MARION, LTD.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on June 13, 2001, and was in existence or authorized to transact business in the State of Indiana on January 22, 2002.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Twenty-Second Day of January, 2002.

Sue Anne Gilroy

SUE ANNE GILROY, Secretary of State

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FEB 14 PM 1:40
CLERK OF THE SECRETARY OF STATE
INDIANAPOLIS, INDIANA