

FO 20 000001094

TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LNS ASSOCIATES, 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:

Lovick P. Suddath

(Name of Person)

LNS ASSOCIATES, INC

(Firm/Company)

103 Sea Marsh Road

(Address)

Amelia Island, FL 32034

(City/State and Zip code)

For further information concerning this matter, please call:

Nina B. Suddath

at (

904

) 277-8800

(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

FILED  
02 MAR -1 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FL 32314

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-02/11/02-01079-016  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

W02-4376



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

February 14, 2002

LOVICK P SUDDATH  
103 SEA MARSH ROAD  
AMELIS ISLAND, FL 32034

SUBJECT: LNS ASSOCIATES, INC.  
Ref. Number: W02000004376

We have received your document for LNS ASSOCIATES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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: 102A00009091

FILED  
02 MAR -1 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. LNS ASSOCIATES, 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. 58-2083008  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 02-01-94 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. 103 Sea Marsh Road, Amelia Island, FL 32034  
(Principal office address)  
103 Sea Marsh Road, Amelia Island, FL 32034  
(Current mailing address)
8. Real Estate Development, Management @ Sales  
(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: Lovick P. Suddath  
Office Address: 103 Sea Marsh Road  
Amelia Island 32034  
(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.*



(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.

FILED  
02 MAR 11 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

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

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

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

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

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

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

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

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

B. OFFICERS

President: Lovick P. Suddath

Address: 103 Sea Marsh Road, Amelia Island, FL 32034  
\_\_\_\_\_

Vice President: \_\_\_\_\_

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

Secretary: Nina B. Suddath

Address: 103 Sea Marsh Road, Amelia Island, FL 32034  
\_\_\_\_\_

Treasurer: Nina B. Suddath

Address: 103 Sea Marsh Road, Amelia Island, FL 32034  
\_\_\_\_\_

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

13. Lovick P. Suddath

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

14. Lovick P. Suddath President

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

FILED  
02 MAR - 1 PM 12:06  
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 : 020310939  
CONTROL NUMBER : K403277  
DATE INC/AUTH/FILED: 02/01/1994  
JURISDICTION : GEORGIA  
PRINT DATE : 01/31/2002  
FORM NUMBER : 211

LNS ASSOCIATES, INC.  
LOVICK P. SUDDATH  
103 SEA MARSH RD.  
AMELIA ISLAND, FL 32034

**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:

**LNS ASSOCIATES, 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.



*Cathy Cox*

Cathy Cox  
Secretary of State