

Division of Corporations

Page 1 of 2

F020000001615**Florida Department of State**

Division of Corporations

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Katherine Harris, Secretary of State

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DIVISION OF CORPORATIONS

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TALLAHASSEE, FLORIDA

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FOREIGN PROFIT QUALIFICATION**THE SUNSET GROUP, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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CORPORATESERVICES

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P.2

Department of State 4/1/2002 10:56 PAGE 1/1 RightFAX

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 1, 2002

PAUL SMITH

SUBJECT: THE SUNSET GROUP, INC.
REF: W02000008955

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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P.64

P.5

H020000684520

CORPORATE RESOLUTION

THE SUNSET GROUP, INC , Incorporated under the laws of the state of Georgia adopts the following resolution. That the name of the corporation for the purpose of doing business in the State of Florida shall be THE SUNSET GROUP PARTNERS, INC.



Ben Jackson, President
THE SUNSET GROUP, INC

P. 02
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

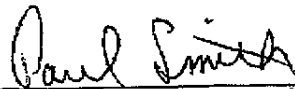
**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

1. THE SUNSET GROUP, 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. 58-2609790
(FEI number, if applicable)
4. 3-22-01
(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. 413 SHORTER AVE. #107 ROME, GA 30165
(Principal office address)

(Current mailing address)
8. ANY LAWFUL PURPOSE
(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: A1A Corporate Services Inc.
Office Address: 218 Southern Country Lane
QUINCY, Florida 32351
(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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: LESLIE JACKSON

Address: 534 PERY FARM RD.

CAVE SPRING, GA 30124

Vice Chairman: BEN JACKSON

Address: 534 PERY FARM RD.

CAVE SPRING, GA 30124

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: BEN JACKSON

Address: 534 PERY FARM RD.

CAVE SPRING, GA 30124

Vice President: _____

Address: _____

Secretary: BEN JACKSON

Address: 534 PERY FARM RD. CAVE SPRING, GA 3012

Treasurer: BEN JACKSON

Address: 534 PERY FARM RD. CAVE SPRING, GA 30124

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. _____

BEN JACKSON

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

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

CONTROL NUMBER : 0114293
DATE INC/AUTH/FILED: 03/22/2001
JURISDICTION : GEORGIA
PRINT DATE : 03/29/2002
FORM NUMBER : 211

AIA CORPORATE SERVICES INC.
PAUL SMITH
6538 COLLINS AVE.
MIAMI BEACH, FL 33141

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

THE SUNBEL GROUP, 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.

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Cathy Cox
Secretary of State

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