

F020000002274

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: N81550, 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:

JAMES A. BLACK, III

(Name of Person)

N81550, INC.

(Firm/Company)

429 S. TYNDALL PKWY SUITE L

(Address)

PANAMA CITY FL 32404

(City/State and Zip code)

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-05/01/02--01074--006
*****78.75 *****78.75

For further information concerning this matter, please call:

JAMES A. BLACK, III

(Name of Person)

at (850) 914 0002

(Area Code & Daytime Telephone Number)

Name	STREET ADDRESS:
Availability	Registration Section
	Division of Corporations
Document	409 E. Gaines St.
Examiner	Tallahassee, FL 32399
Updater	Enclosed is a check for the following amount:
Updater	<input type="checkbox"/> \$70.00 Filing Fee
Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

☐ \$78.75 Filing Fee & Certificate of Status
☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. N81550, 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. DELAWARE 3. 59-3713078
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 9 APR 2001 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 01/01/02
(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. 429 S. TYNDALL PKWY SUITE L PANAMA CITY FL 32404
(Principal office address)
- SAME
(Current mailing address)

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02 MAY - 11 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. ANY LAWFUL ACTIVITY
(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: Diane C. Hare, CPA
- Office Address: 3003 S. Hwy 77 Suite A
Lynn Haven, Florida 32444
(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.

Diane C. Hare, CPA
(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: JAMES A. BLACK, III

Address: 429 S. TYNDALL PKWY SUITE L
PANAMA CITY FL 32404

Vice Chairman: _____

Address: _____

Director: RANDALL G. RUSHE

Address: 429 S. TYNDALL PKWY SUITE L
PANAMA CITY FL 32404

Director: DAVID L. CALLOWAY

Address: 429 S. TYNDALL PKWY SUITE L
PANAMA CITY FL 32404

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: JAMES A. BLACK, III

Address: SAME

Vice President: _____

Address: _____

Secretary: RANDALL G. RUSHE

Address: SAME

Treasurer: DAVID L. CALLOWAY

Address: SAME

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

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

14. JAMES A. BLACK, III PRESIDENT
(Typed or printed name and capacity of person signing application)

Delaware

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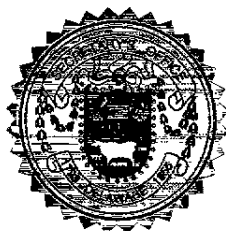
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "N81550, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF APRIL, A.D. 2002.

FILED

02 MAY - 1 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 1740911