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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LD Reeves & 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:

Robert Vint 100007244341--8
(Name of Person) -08/21/02--01020--003
LD Reeves & Associates *****78.75 *****78.75
(Firm/Company)
124 Cross St.
(Address)
Punta GORDA, FL 33950
(City/State and Zip code)

For further information concerning this matter, please call:

Robert Vint at (941) 575-3555
(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

189,547,671

1002-24431
94 not



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

August 22, 2002

ROBERT VINT
124 CROSS ST
PUNTA GORDA, FL 33950

SUBJECT: LD REEVES & ASSOCIATES INCORPORATED
Ref. Number: W02000024431

We have received your document for LD REEVES & ASSOCIATES INCORPORATED 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 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.

Marsha Thomas
Document Specialist

Letter Number: 902A00049397

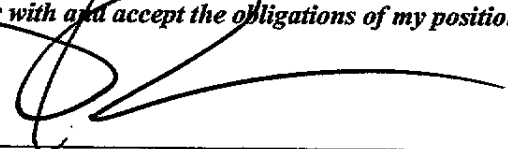
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*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. LD Reeves & Associates, Incorporated
(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. Tennessee 3. 62-1780206
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 10, 2000 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. 1001 S. Chilhowee dr., Knoxville, TN 37914
(Principal office address)
124 Cross St., Punta Gorda, FL 33950
(Current mailing address)
8. Consultancy Services
(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: Robert Vint
Office Address: 2144 Harbour Drive
Punta Gorda, Florida 33951
(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.

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

A. DIRECTORS

Chairman: Loretta D. Reeves

Address: 2144 Harbour Dr.

Punta Gorda, FL 33983

Vice Chairman: Robert Vint

Address: 2144 Harbour Dr.

Punta Gorda, FL 33983

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Loretta D. Reeves

Address: 2144 Harbour Dr.

Punta Gorda, FL 33983

Vice President: _____

Address: _____

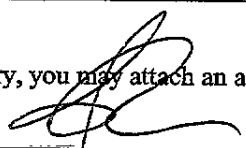
Secretary: Robert Vint

Address: 2144 HARBOUR DR. , Punta Gorda, FL 33983

Treasurer: Robert Vint

Address: 2144 HARBOUR DR. , Punta Gorda, FL 33983

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. Robert J. Vint - Vice Chair
(Typed or printed name and capacity of person signing application)

Secretary of State
Division of Business Services
: 312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
: Nashville, Tennessee 37243

ISSUANCE DATE: 08/13/2002
REQUEST NUMBER: 02225542
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/12/2000
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0382807
JURISDICTION: TENNESSEE

TO:
LD REEVES AND ASSOCIATES INC
%ROBERT VINT
124 CROSS ST
PUNTA GORDA, FL 33950

REQUESTED BY:
LD REEVES AND ASSOCIATES INC
%ROBERT VINT
124 CROSS ST
PUNTA GORDA, FL 33950

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"LD REEVES & ASSOCIATES INC"

THAT THE CORPORATION IS DELINQUENT IN THE PAYMENT OF FRANCHISE AND EXCISE TAXES;
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED
WITH THIS OFFICE; AND
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 08/13/02

FROM:
LD REEVES & ASSOCIATES INC
1001 CHILHOWEE DR
KNOXVILLE, TN 37914-0000

RECEIVED: FEES \$20.00 \$0.00
TOTAL PAYMENT RECEIVED: \$20.00

RECEIPT NUMBER: 00003129221
ACCOUNT NUMBER: 00356352



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE