# F03000000701

### 00789-00609-0011

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(Business Entity Name)				
(Document Number)				
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### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: EMORY BOONE REALTY, INC.  (Name of corporation - must include suffix)
(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:
EMORY BOONE
(Name of Person)
Emory Boone HEACTY INC.
EMORY BOONE  (Name of Person)  Emory Boone HEACTY, INC.  (Firm/Company)
1133 HUDSON DRIVE N.E.  (Address)  ATZANTA ON 30306  (City/State and Zip code)
(Address)
ATZANTA 6H 30306
(City/State and Zip code)
For further information concerning this matter, please call:
to a him dal
Name of Person)  Area Code & Daytime Telephone Number)  Area Code & Daytime Telephone Number)
HILLIP DAYER (Area Code & Daytime Telephone Number)
/ /// / / / / / / / / / / / / / / / /
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section Division of Corporations Division of Corporations
Division of Corporations  409 E. Gaines St.  Division of Corporations P.O. Box 6327
Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Begin{array}{cccccccccccccccccccccccccccccccccccc



## FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

February 4, 2003

EMORY BOONE EMORY BOONE REALTY, INC. 1133 HUDSON DRIVE NE ATLANTA, GA 30306

SUBJECT: EMORY BOONE REALTY, INC.

Ref. Number: W03000003217

We have received your document for EMORY BOONE REALTY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

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) 245-6967.

Letter Number: 203A00007380

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

#### 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.

GEORGIA		3.	58-2522362
(State or countr	y under the law of which it is incorporated)		(FEI number, if applicable)
JANUARY 26, 2000		. 5.	PERPETUAL
(Da	te of incorporation)	•	(Duration: Year corp. will cease to exist or "perpetual")
UPON Q	UALIFICATION		
(Date first trans			transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)
1133 ⊞⊟	(SEE SECTIONS 607.) DSON DRIVE N.E., ATLANTA, G		• •
	(Principal office		
	(rimeigai office	auui	CSS)
SAME			
SAME	(Current mailing	addr	ress)
	(Current mailing	addr	ress)
	(Current mailing	addr	ess)
REAL EST	,		
REAL ES	FATE BROKERAGE (s) of corporation authorized in home state of	or coi	untry to be carried out in state of Florida)
REAL EST	FATE BROKERAGE  (s) of corporation authorized in home state of the	or coi	
REAL ES	FATE BROKERAGE  (s) of corporation authorized in home state of the	or coi	untry to be carried out in state of Florida)
REAL EST (Purpose Name and st	FATE BROKERAGE  (s) of corporation authorized in home state of the	or coi	untry to be carried out in state of Florida)
REAL EST	FATE BROKERAGE  (s) of corporation authorized in home state of the	or coi	untry to be carried out in state of Florida)

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:	c
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: EMORY BOONE	· ·
Address: 1133 HUDSON DRIVE NE ATLANTA GH 30306	
Vice President:	
Secretary:	
Address:	
freasurer:	<del></del>
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number	r 12 of the application)
14. EMORY BOOKE, PRESIDENT	
(Typed or printed name and capacity of person signing applications)	tion)

Secretary of State **Corporations Division** 315 West Tower

#2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0004472 DATE INC/AUTH/FILED: 01/26/2000 : GEORGIA JURISDICTION PRINT DATE : 01/29/2003

FORM NUMBER

EMORY BOONE REALTY, INC. PHILLIP BAKER 1133 HUDSON DRIVE NE ATLANTA, GA 30306

#### 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

, EMORY BOONE REALTY,

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 Setretary 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 States. the Secretary of State

electronically transmitted, issued and certified in This information is 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.

20030129213826545



Cathy Cox Secretary of State