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| Special Instructions to F | iling Offic | er: | |
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SECRETARY OF STATE
SECRETARY OF STATE

TRANSMITTAL LETTER

| TO: | Registration Se Division of Co | | | <u>-</u> . | | | | | |
|-----------------------------|---|--|-------------|---|-------------------|-----------------------|------------|-------------|----|
| SUBJ | ECT: | Tradewinds P | roperti | Les 606, Inc. | | - | | | |
| | | | | n - must include s | uffix) | | | | |
| Dear S | Sir or Madam: | | - | | | | | | |
| "Certif | | tion by Foreign Corpor e", and check are subm Florida. | | | | | | | |
| Please | return all corresp | pondence concerning th | his matter | to the following: | | | | | |
| Lind | la B. Selfrio | dge | | | | | | | |
| | | | (Name of | Person) | | | | | |
| | | | | | | | SEC | 03 | |
| | | | (Firm/Co | mpany) | | | 17 (13 | 3 | -1 |
| 779 | Bedford Oaks | s Drive | | - = | | | | ō | - |
| | | | (Addr | ess) | | | 1116.5 | | T |
| Mari | letta, Georg: | ia 30068 | | | | | | 00 8 KV | _ |
| | | | ity/State a | and Zip code) | | | <u> </u> | | |
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| For fur | rther information | concerning this matter | , please c | all: | | - | | | |
| | | - | • | | | | | | |
| Lind | la B. Selfrio | dge at (| 770 | = 850-7061 Code & Daytime T | | | | | |
| | (Name of Person | on) | (Area (| Code & Daytime T | elephone | Number) | | ,. | |
| | | | | | | | | | |
| Regist Divisio 409 E. | ET ADDRESS: ration Section on of Corporation Gaines St. assee, FL 32399 | ns | | MAILING ADD Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL | tion oorations | _ | | | |
| Enclos | ed is a check for | the following amount: | | | | | | | |
| □ \$70 | 0.00 Filing Fee | ☐ \$78.75 Filing Fee Certificate of Sta | | \$78.75 Filing Fed Certified Copy | e& KD | \$87.50 I Certific | _ | tatus & | ķ |

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.

| 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) (FEI number, if applicable) | |
|--|------------------|
| (State or country under the law of which it is incorporated) (FEI number, if applicable) | |
| | |
| | |
| 4. <u>5/15/2003</u> 5. <u>Perpetual</u> | |
| (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. 779 Bedford Oaks Drive, Marietta, Georgia 30068 | |
| (Principal office address) | |
| 779 Bedford Oaks Drive, Marietta, Georgia_30068 | |
| (Current mailing address) | -1 77 |
| | = |
| 8. Purchase property in Florida | Ш |
| (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) | |
| A 00 | |
| Name: <u>Jerry D. Miller</u> | |
| Office Address: 98 Vista Bluffs | |
| | |
| Destin ,Florida 32541 (City) (Zip code) | |
| (Enp 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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this capa |)lace |
| uesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capa further agree to comply with the provisions of all statutes relative to the proper and complete performance of m | |
| duties, and I am familiar with and accept the obligations of my position as registered agent. | r |

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: _____Toney E. Selfridge Address: 779 Bedford Oaks Drive Marietta, Georgia 30068 Vice Chairman: Craig E. Hubbell Address: 1659 Barn Swallow Place Marietta, Georgia 30062 Director: _ Address: __ B. OFFICERS Toney E. Selfridge President: ___ Address: 779 Bedford Oaks Drive Marietta, Georgia 30068 Vice President: Margaret Elaine Hubbell 1659 Barn Swallow Place Address: _ Marietta, Georgia 30062 Secretary: ____Linda B. Selfridge Address: _____779 Bedford Oaks Drive, Marietta, Georgia 30068 Treasurer: <u>Craig E. Hubbell</u> 1659 Barn Swallow Place Address: _ Marietta, Georgia 30062 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 12 of the application) Toney E. Selfridge, President

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

14.

Secretary of State

Corporation's Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 031890602
CONTROL NUMBER : 0327568
DATE INC/AUTH/FILED: 05/15/2003
JURISDICTION : GEORGIA
PRINT DATE : 07/08/2003
FORM NUMBER : 211

STITES & HARBISON LINDA SELFRIDGE 3350 RIVERWOOD PKWY STE 1700 ATLANTA, GA 30339

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgian hereby certify under the seal of my office that

TRADEWINDS PROPERTIES 606, 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 abovenamed 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.



Aury Cop

Cathy Cox Secretary of State