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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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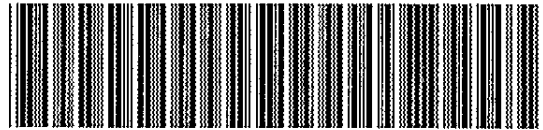
(Business Entity Name)

(Document Number)

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DIVISION OF REGISTRATION

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03 SEP 30 PM 1:45  
TALLAHASSEE  
FLORIDA



CORPORATION SERVICE COMPANY™

03 SEP 30 PM 1:45  
FILED  
FALLINGBEE, ALABAMA

ACCOUNT NO. : 072100000032

REFERENCE : 260020 7392487

AUTHORIZATION :

COST LIMIT : ~~\$ 70.00~~ PPD

ORDER DATE : September 29, 2003

ORDER TIME : 9:40 AM

ORDER NO. : 260020-005

CUSTOMER NO: 7392487

CUSTOMER: Ms. Ann Barker  
Smith Real Estate Services,  
Suite 100  
2695 Buford Highway N.w.  
Atlanta, GA 30324

FOREIGN FILINGS

NAME: SMITH REAL ESTATE  
SERVICES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER: \_\_\_\_\_

**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. SMITH REAL ESTATE SERVICES, 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 3. 58-2000886  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/30/1990 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. 1326 Central Avenue, Sarasota, FL 34236  
(Principal office address)  
1326 Central Avenue, Sarasota, FL 34236  
(Current mailing address)
8. Real Estate Consulting 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: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee Florida 32301  
(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.*

Corporation Service Company

*Ann Shelling*  
(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: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: Pamela J. Smith

Address: 2746 McCoy Avenue

East Point, GA 30344

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Pamela J. Smith

Address: 2746 McCoy Avenue, East Point, GA 30344

Treasurer: Pamela J. Smith

Address: 2746 McCoy Avenue, East Pont, GA 30344

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. Pamela J. Smith

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

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

CONTROL NUMBER : K021900  
DATE INC/AUTH/FILED: 11/30/1990  
JURISDICTION : GEORGIA  
PRINT DATE : 09/29/2003  
FORM NUMBER : 211

03 SEP 30 PM 1:45  
FILED  
CLERK OF SUPERIOR COURT  
JULIA

CORPORATION SERVICE COMPANY  
LYNETTE COLEMAN  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

**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

**SMITH REAL ESTATE SERVICES, 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.

20030929163322428



*Cathy Cox*

Cathy Cox  
Secretary of State