# F0300005203

(Requestor's Name)	_
(Address)	-
(Address)	_
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	-
	_
Special Instructions to Filing Officer:	
	l
	İ
	l

Office Use Only

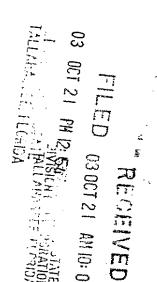


700021843007

10/21/03--01002--025 \*\*8.75

10/21/03--01002--024 \*\*70.00

13K





UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue
Tallahassee, Florida 32301 (850) 681-6528

HOLD FOR PICKUP BY **UCC SERVICES** OFFICE USE ONLY

### S):

FILING & SEARCH		October 21, 2003	
	CORPORATION NAME (S) AND DOCU on Investments, Inc.	UMENT NUMBER (	
Filing Evidence   ▶ Plain/Confirmation Copy	Type of Docum  ☐ Certificate of Sta		
□ Certified Copy	Certificate of Go	ood Standing	
	□ Articles Only		
Retrieval Request  Photocopy  Certified Copy	☐ All Charter Doc Articles & Ame ☐ Fictitious Name ☐ Other		
NEW FILINGS	AMENDMENTS	7	
Profit	Amendment	7	
Non Profit	Resignation of RA Officer/Director		
Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal		
Other	Merger		

OTHER FILINGS
 Annual Reports
Fictitious Name
Name Reservation
Reinstatement

	REGISTRATION/QUALIFICATION
X	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

## 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.  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida?  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida?  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida?  (If name unavailable in Florida, enter alternate corporated)  (Fill name, "Co.," "Corp." "Inc.," "Corp.")  (If name unavailable in Florida, enter alternate corporated)  (If name unavailable in Florida, "Corporated)  (If name unavailable in Florida, "It name adopted for the purpose of transacted business in Florida, insert "upon qualification.")  (SEE SECTION 607.1502 and 817.155, F.S.)  (Principal office address)  Florida Atlanta, GA 30 30 5  (Purpose(3) 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)  (City)  (City)  (City)  (City)  (City)  (City code)  10. Registered agent? Sacceptance:  Having been named as registered agent and to accept stee 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 an	IN COMPLIANC	CE WITH SECTION  OF RIGHT CORPOR	N 607.1 <b>503</b> , FI PATYON TO TR	LORIDA STAT PANSACT BUS	UTES, THE INESS IN T	FOLLOWI HE STATE (	NG IS SUBA OF FLORIE	ATTED TO A. 95	,
2. CA (State or country under the law of which it is incorporated)  4. Oct 28 1987  (Duration! Vest corp. will cease to exist or "perpetual")  6. Upon qualification!  (Date of incorporation)  (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. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  S25 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate 11 vest meats  (Current mailing address)  9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  William Schem, Esquire  Name: Cla Regels a Truster  Office Address: 1301 Riverplace Suite 1500  Tac Kson ile place  (City)  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		Grey	) { pn	Inve:	tmen	75.	Inc.		e 7
2. CA (State or country under the law of which it is incorporated)  4. Oct 28 1987  (Duration! Vest corp. will cease to exist or "perpetual")  6. Upon qualification!  (Date of incorporation)  (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. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  S25 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate 11 vest meats  (Current mailing address)  9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  William Schem, Esquire  Name: Cla Regels a Truster  Office Address: 1301 Riverplace Suite 1500  Tac Kson ile place  (City)  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	(Enter name of "Inc.," "Co.," "	corporation; must in "Corp," "Inc," "Co,"	nclude "INCOR! or "Corp.")	PORATED," "	COMPANY,"	"CORPOR	ATION,"	The state of the s	
4. Oct 28 1987  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (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. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  S25 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate /nvestmeaster 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)  William Schem, Esquire  Name: 40 Regels 2 towers  Office Address: 1301 Riverplace Suite 1500  Tacksonville , Florida 32207  (City)  To 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 duttes	(If name unava	ailable in Florida, en	ter alternate corp	oorate name ado	pted for the p	surpose of tra	nsacting busi	ness in Flori	da) Z
4. Oct 28 1987  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (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. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  S25 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate /nvestmeaster 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)  William Schem, Esquire  Name: 40 Regels a towers  Office Address: 1301 Riverplace Suite	2.	GA		3.	58	-190	4260	0	
(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. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  S25 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate Investment's 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)  William Schem, Esquire  Name: Clo Rogels & Towers  Office Address: 1301 Riverplace Suite 1500  Tacksonville , Florida 32207  (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 dutles									
(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. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  525 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate //vest neats  (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)  William Schen, Esquire  Name: c/o Regelis a towers  Office Address: 1301 Riverplace Suite /500  Tacksonville , Florida 32207  (City)  To 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	4. 0	ct 28, 1	987	_ 5	bei	petuq	:/		
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)  7. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  S25 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate // Nest Men & (Current mailing address)  9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  William Schen, Esquire  Name: c/o Regels at Towers  Office Address: 1301 Riverplace Suite 1500  Tacksonville , Florida 32207  (City) (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									
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)  7. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  S25 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate // Nest Men & (Current mailing address)  9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  William Schen, Esquire  Name: c/o Regels at Towers  Office Address: 1301 Riverplace Suite 1500  Tacksonville , Florida 32207  (City) (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	6	upon	qualit	ication					
7. 525 Pharr Road Atlanta, 6A 30305  (Principal office address)  S25 Pharr Road Atlanta, 6A 30305  (Current mailing address)  8. real estate //vest Ments  (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)  W: 11: a m Schen, Esquire  Name: c/o Rogets a towers  Office Address: 1301 Riverplace Suite 1500  Tacksonv: lee , Florida 32207  (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			YERE SECTION	ያፍ ፍ <u>ል</u> ን ተፈልነ <i>ፍ</i> ለ	17 (502 and 8	17 155 P.C.	`		
8. real estate //vestments  (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)  W: //: a m	~ .3	525 Ph	and R	oa A	Atla	en ta	lo A	303.	05
8. real estate //vest Ments  (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)  William Schem, Esquire  Name: Clo Regels a towers  Office Address: 1301 Riverplace Suite 1500  Tacksonville , Florida 32 207  (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	/		(Princip	al office address	s)	,,,,,,	<u> </u>		·
8. real estate //vest Ments  (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)  William Schem, Esquire  Name: Clo Regels a towers  Office Address: 1301 Riverplace Suite 1500  Tacksonville , Florida 32 207  (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		525 P	harr	Road	At	Vanta.	GA	303	05
8. real estate //vest Ments  (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)  William Schem, Esquire  Name: Clo Regels a towers  Office Address: 1301 Riverplace Suite 1500  Tacksonville , Florida 32 207  (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	- <del>-</del>		(Current	mailing addres	<u>s)</u>				<del></del>
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)    W:	s re	eal estat	ie /1	vestme	n 25				
Name: C/o Rogers & Towers  Office Address: 1301 Riverplace Suite   500  Tacksonville Plorida 32 207  (City)  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									
Office Address: 1301 Riverplace Suite 500  Tacksonville Florida 32207  (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	9. Name and <u>si</u> Name:	W:11:4 m	lorida register Schen <u>s &amp; 704</u>	ed agent: (P. , Esquir //ers	O. Box of M	lan Drop Bo	ox <u>MUT</u> ace	eptable)	
Tacksonville, Florida 32 207 (City)  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		•							
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		Tacks	mu! 1/e			3220	7		
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		- 7 4 C 1 3 C	lity)		, Piorida ,	(Zip code	· ·)		
les SATA	Having been no designated in th further agree to	amed as registered his application, I h o comply with the	agent and to dereby accept to or over the original terms of a second accept to the original terms of a second accept the original terms of a second acceptance o	he appointme: Il statutes rela	nt as register tive to the p	red agent ai roper and c	nd agree to i	act in this c	apacity. I
(Registered agent's signature)		ler	THU	(m)			·		

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:	Hal W. Lamb, TIL	<del>350 3 1</del>
Address:	525 Pharr Road	3 3
	Atlanta, GA 30305	
Vice Chairman:	Lelia Lamb	100 10
Address:		क्षि प्र
	Atlanta, 6A 30305	, , , , , , , , , , , , , , , , , , ,
Director:	Julian S. Betts, Ir.	
Address:	525 Pharr Road	
	Attanta 6A 30305	
B. OFFICERS		
President:	Hal W. Lamb, III	
Address:	525 Pharr Road	
	Atlanta, GA 30305	
Vice President:		
Secretary:	Lelia Lamb	
Address:	a = a + b + b + b + b + b + b + b + b + b +	A 30315
Treasurer:	Tylian S. Bets, Tr.	
Address:	525 Pharr Road Attanta, GA	30305
NOTE: If necess	sary, you may attach an addendum to the application listing additional officers and	or directors.
13	Signature of Director or Officer listed in number 12 of the application)	
14.	orfilments of particular or others insied in multiplet in or me appropriate)	
17	(Typed or printed name and capacity of person signing application)	_ <del>_</del>

## **Secretary of State**

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

UNITED CORNERS, INC. JULIAN S. BETTS, JR. 525 PHARR ROAD ATLANTA, GA 30305 CONTROL NUMBER : J723987
DATE INC/AUTH/FILED: 10/28/1987
JURISDICTION : GEORGIA
PRINT DATE : 10/16/2003

FORM NUMBER : 211

03 RT 21 PA D: 54

#### 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

GREY LION INVESTMENTS (INC.) A GEORGIA PROBIT CORPORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia annual and Code of Georgia annual registration provisions

Said entity was formed in the jurisdiction Blated above or was authorized to transact business in Georgia on the above land 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.

20031016191225073



Cathy Cox Secretary of State