

FO3000005376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

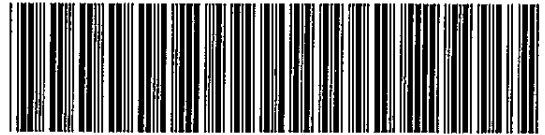
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/29/03--01002--014 **70.00

RECEIVED
03 OCT 28 PM 2:48
DIVISION OF CORPORATION

FILED
03 OCT 28 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten initials

FLORIDA COMPLIANCE SPECIALISTS, INC.

DAVE TAYLOR, PRESIDENT



2331 Hanson Place
Tallahassee, Florida 32301
Voice: (850) 942-5464 Fax: (850) 942-5111
www.floridacompliance.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Conroy & Associates, Inc (Corporation Name) _____ (Document #) _____
2. _____ (Corporation Name) _____ (Document #) _____
3. _____ (Corporation Name) _____ (Document #) _____
4. _____ (Corporation Name) _____ (Document #) _____

FILED
 03 OCT 28 AM 10:07
 STATE
 TALLAHASSEE, FLORIDA

- Walk in
 Pick up time 10-29
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials	
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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.

LOVEJOI ASSOCIATES, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

3. Georgia 58-1981352 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

5. 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.)

6. 8046 Roswell Rd. Ste 101-B Atlanta, GA 30350 (Principal office address)

8046 Roswell Rd Ste 101-B Atlanta, GA 30350 (Current mailing address)

8. Mortgage Brokerage (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: John C. Davis

Office Address: 1620 Hendrick Ave

Jacksonville, 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, and I am familiar with and accept the obligations of my position as registered agent.

[Signature of John C. Davis] (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:

FILED OCT 13 1983

A. DIRECTORS

Chairman: Michael P. Loveton

Address: 8750 Nesbit Lakes Drive
Alpharetta, GA 30022

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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OCT 28 AM 10:03 '97
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE

B. OFFICERS

President: Michael P. Loveton

Address: 8750 Nesbit Lakes Drive
Alpharetta, GA 30022

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Michael P. Loveton
(Signature of Director or Officer listed in number 12 of the application)

14. Michael P. Loveton
(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 : K202235
DATE INC/AUTH/FILED: 02/10/1992
JURISDICTION : GEORGIA
PRINT DATE : 10/28/2003
FORM NUMBER : 211

FILED
03 OCT 28 10:07 AM '03
TALLAHASSEE, FLORIDA
STATE FILLS

LOVEJOY & ASSOCIATES, INC.
MICHAEL P. LOVEJOY
8046 ROSWELL ROAD
STE. 101-B
ATLANTA, GA 30350

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

LOVEJOY & ASSOCIATES, 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.

20031028162108945



Cathy Cox
Secretary of State