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TRANSMITTAL LETTER

TO:	Registration Sec Division of Corp							
SUB.	JECT:	STOI	E MOU	NTAIN	PRODUCTIONS, INC	5.		
		(Nar	ne of cor	poratio	n - must include suffix)			
Dear	Sir or Madam:							
"Cert	nclosed "Application ificate of Existence act business in Flori	", and check ar	Corporation submitte	on for . ed to r	Authorization to Transac egister the above referen	et Business in Flo ced foreign corpo	rida", oration to	
Please	e return all correspo	ondence concer	ning this	matter	to the following:			
J. B	RIAN O'NEIL							
*** **			(N	ame of	Person)	·		
MOC	RE INGRAM JO	HNSON & ST	CELE, L	LP			03 OCT 29	<u>.</u>
	<u> </u>	<u> </u>	(Fi	rm/Co	mpany)		CT EX	Ž,
192	anderson str	EET					29 29	? ?
				(Addı	ess)		PH	Ş
MAR	IETTA, GA 3006	50					OKAI	ں, ز:
			(City)	State a	and Zip code)		29 PH 2:53	シラ
For fi	urther information o	concerning this	matter, p	lease c	all:			
J. BR	MAN O'NEIL		at (770) 429-1499			
	(Name of Perso	n)		(Area (Code & Daytime Telepho	one Number)	-	
Regis Divis 409 E	EET ADDRESS: tration Section ion of Corporations C. Gaines St. hassee, FL 32399	S			MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ons		
Enclo	sed is a check for t	he following as	nount:					
Ø \$7	0.00 Filing Fee	□ \$78.75 Fili Certificate			\$78.75 Filing Fee & Certified Copy	S87.50 Filin Certificate Certified C	of Status &	

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 na	ame adopted for the purpose of transacting business	in Florida)		
GEORGIA	.3			
State or country under the law of which it is incorporated)	(FEI number, if applicable)			
10/15/86	5. PERPETUAL			
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")			
UPON QUALIFICATION				
Date first transacted business in Florida. If corporation has (SEE SECTIONS 607.1) 5387 MANOR DRIVE, STONE MOUNTAIN, GA	1501, 607.1502 and 817.155, F.S.)	annication.") UNIS		
(Principal office address)		<u> </u>		
5387 MANOR DRIVE, STONE MOUNTAIN, GA	30083	29_c		
(Current mailing address)		PH		
		5:		
ARCHITECTURAL LIGHTING		<u>و</u>		
(Purpose(s) of corporation authorized in home state	or country to be carried out in state of Florida)	ယ် ဦ		
Name and street address of Florida registered age	nt: (P.O. Box or Mail Drop Box NOT accepta	ble)		
Name: LARRY COX	and the second s			
fice Address: 305 AIRPORT ROAD				
ORMOND BEACH,	, Florida 32174			
	(Zip code)			

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.

Jan (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

Chairma	n; DAVID L. GRAVES			
Address:	5387 MANOR DRIVE			<u> </u>
	STONE MOUNTAIN, GA 30083			
Vice Cha	airman:	_	<i>i</i> n	
	And the second s			
Director:	ROBERT C. DAFFIN			
	5387 MANOR DRIVE			
	STONE MOUNTAIN, GA 30083			
Director:				
				
-			 Q	£.,
B. OFI	FICERS		BOCT	SION
Presiden	t: DAVID L. GRAVES		29	
	5387 MANOR DRIVE		₩ PM	공유디 오ơ
	STONE MOUNTAIN, GA 30083		5: 5	- k mm-1
Vice Pre	esident:		<i>ယ</i> 	- 5
Address				
Secretar	y: ROBERT C. DAFFIN			
Address	TOOK SELVED ORDER CHOIN MOUNTAIN CA COCC			
	ROBERT C. DAFFIN			
	5387 MANOR DRIVE, STONE MOUNTAIN, GA 30083			
	To the standard of the second	an dina	ato ro	
NOTE	: If necessary, you may attach an addendum to the application listing additional officers and/	or anse	.w.s.	
13.	(Signature of Director or Officer listed in number 12 of the application)			<u>_</u> _
14. R	OBERT C. DAFFIN, SECRETARY/TREASURER			
- ' '	(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 : J700254
DATE INC/AUTH/FILED: 10/15/1986
JURISDICTION : GEORGIA
PRINT DATE : 10/24/2003
FORM NUMBER : 211

MOORE, INGRAM, JOHNSON & STEEL, LLP J. BRIAN O'NEIL 192 ANDERSON COURT MARIETTA, GA 30060

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

TONE MOUNTAIN PRODUCTIONS

is in compliance with the appricable filing and annual registration oprovisions 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 Seorgia on the labove safe 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 relater only to the legal existence of the above-named entity as of the print date above. It does not circuity 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.

20031024174428405



Cathy Cox Secretary of State