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Dianel

Here is the original Certificate of Existence.

Could you please fax a copy of the Fla. Corp. Papers to Kathy at City of Sebastian.

Fax # 772-589-2566

If you have any question please Cell Deline at 678-300-5304

> Thanks, Dann

03 DEC 31 PM 3: 30



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 29, 2003

JIMMY GARNER UNITED FRAMING CONTRACTORS, INC. P.O. BOX 1568 FLOWERY BRANCH, GA 30542

SUBJECT: UNITED FRAMING CONTRACTORS, INC.

Ref. Number: W03000039537

We have received your document for UNITED FRAMING CONTRACTORS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$87.50.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 303A00068975

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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. zationtrail enmark (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.) (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.) BW 1568 Flwm (Current mailing address) (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) 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.

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: | | | | | |
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| Disease. | | | | | |
| Director: | | | | | |
| Address: | | | | | |
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| B. OFFICERS | | | | | |
| President: <u>Jimmy</u> Garwar | · · · · · · · · · · · · · · · · · · · | | | | |
| Address: 7552 Woody Spritus DR | | | | | |
| Flung Brand Ge 30542 | 3 DH | | | | |
| Vice President: RAY Garra | S E | | | | |
| Address: 881 Berrymen Place | 7 | | | | |
| Laurenaille, 6 a 30245 | မှ ိ ့ | | | | |
| , | 8 3 3 3 | | | | |
| ecretary: | - 5 | | | | |
| Address: | | | | | |
| reasurer: | | | | | |
| Address: | | | | | |
| | | | | | |
| NOTE: If necessary, you may attach an addendum to the application listing additional off | icers and/or directors. | | | | |
| 3. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 |) of the audient | | | | |
| | | | | | |
| 14. STRMY GARDER (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 DOCKET NUMBER : 033640342 CONTROL NUMBER : 0330040 DATE INC/AUTH/FILED: 05/29/2003 JURISDICTION : GEORGIA PRINT DATE : 12/30/2003

FORM NUMBER : 211

UNITED FRAMING CONTRACTORS, INC.

P.O. BOX 1568 FLOWERY BRANCH, GA 30542

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

UNITED FRAMING CONTRACTORS, 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 above named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application of 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 usafd entity is in existence or is authorized to transact business in this state.



Secretary of State