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(Re	equestor's Name)	
(Ad	idress)	
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(Cil	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	:

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#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations					
Charles Charles	Junstruction Incorporated				
(Name of corporation - must include suffix)					
` ·	,				
Dear Sir or Madam:					
The enclosed "Application by Foreign Corporation fo "Certificate of Existence", and check are submitted to to transact business in Florida.					
Please return all correspondence concerning this matte	er to the following:				
Chris C	Jack				
(Name of	of Person)				
Chris Clark Const. (Firm/C	Inc.				
(Firm/C	ompany)				
4215 Gillionville (Add Alsay, Ge. (City/State	Rd.				
(Add	dress)				
17/3mg, 62	31721				
(City/State	and Zip code)				
For further information concerning this matter, please	call:				
Chris Clark 229	, 894-2673				
(Name of Person) at (229) \$94-2673  (Area Code & Daytime Telephone Number)					
STREET ADDRESS:	MAILING ADDRESS: Registration Section				
Registration Section Division of Corporations	Division of Corporations				
409 E. Gaines St.	P.O. Box 6327				
Tallahassee, FL 32399	Tallahassee, FL 32314				
Enclosed is a check for the following amount:					
□ \$70.00 Filing Fee   □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy				

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	' WITH SECTION 607.1503, 'EIGN CORPORATION TO	TRANSACT B	USINESS IN TH	IE STATE OF F	LORIDA.	TO
1	Chris Och	1 Waste	cotrons 2	-	'cel	
(Name of corpora words or abbrevia	tion; must include the word "IN ations of like import in language partnership if not so contained it	CORPORATES  as will clearly  in the name at p	D", "COMPANY indicate that it is resent.)	", "CORPORATI a corporation inst	(ON" or ead of a	
2. <u> </u>		·3	20-	055816	7	
,	nder the law of which it is inco	rporated)	(F	EI number, if app	licable)	-
4. <u>12/0</u>	of incorporation)	5.		perpet	e/	
(Date o	of incorporation)		(Duration: Year	corp. will cease to	exist or "perpe	tual")
5	ed business in Florida. If corpo	ivalificz	tion _	<u>-</u>		
(Date first transact	ed business in Florida. If corpo	oration has not to	ransacted busines 607.1502 and 81	s in Florida, inser	t "upon qualifica	ition.")
			007.1302 and 61	/.133,1°.3.)		
7	4215 Gillian	ipal office addre	ec)			<del></del>
	Albang, Ga. (Curren	3/72/	33)			
	(Curren	nt mailing addre	ss)			<del></del>
	<b>∽</b>					
3	Construction					
(Purpose(s)	of corporation authorized in ho	ome state or cour	ntry to be carried	out in state of Flo	orida) ≅va s	
. Name and <u>stree</u>	<u>et address</u> of Florida regist	ered agent: (	P.O. Box or Ma	il Drop Box <u>NC</u>	T acceptable)	<u> </u>
Name:	Chris Clark			•	ARA	See
Office Address:	Chris Wark  280 Dogwood S  Santa Rosa Bezo  (City)	t.			ří –	
	$C \downarrow D \downarrow A$	·ý		7211-2		<b>P</b> 111
_	Janto Kosa Dezo	4	, Florida	52459	SIATE FLORID	ည်း ကို 🔼
	(Cny)			(Zip code)	Emi A	ق
0. Registered age			- of	. db	d	
esignated in this a urther agree to co	d as registered agent and to application, I hereby accept mply with the provisions of miliar with and accept the o	the appointme all statutes re	ent as registere lative to the pro	d agent and agr per and comple	ee to act in thi ete performanc	s capacity.
	alla					
. <del>T</del>	(Registe	ered agent's sign	nature)			• •

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:			·
Address:			
Director:			
Director:			
B. OFFICERS  President:	Clock		
Address: 4215	Gillionwille Rd.		
A/32y	Ge. 31721	1 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	THE STATE OF THE S
Vice President:			
Secretary:			
Address:			
	ach ar addendum to the application	n listing additional officers and	Vor directors.
	rman, Vice Chairman, or any offic	er listed in number 12 of the a	pplication)
14	Chris Clark	Pres.	
(Typed or	printed name and capacity of person	on signing application)	

### **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0365721
DATE INC/AUTH/FILED: 12/04/2003
JURISDICTION : GEORGIA
PRINT DATE : 01/08/2004
FORM NUMBER : 211

DIVINE & DOROUGH, P.C. W. DOUGLAS DIVINE 600 N. JACKSON STREET ALBANY, GA 31701

#### 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

HRIS CLARK CONSTRUCTION, 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.

20040108133429658



Cathy Cox Secretary of State