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PICK-UP WAIT	MAIL
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Special Instructions to Filing Officer:	
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SECRETARY OF STATE
SECRETARY OF STATE

### THERIAQUE & PFEIFFER

ATTORNEYS AT LAW I I I 4 EAST PARK AVENUE TALLAHASSEE, FLORIDA 3230 I

DAVID A. THERIAQUE, ESQUIRE STEVE PFEIFFER, ESQUIRE S. BRENT SPAIN, ESQUIRE TELEPHONE: (850) 224-7332 FACSIMILE: (850) 224-7662 EMAIL: dattaw@att.net

February 17, 2004

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re: Application for Authorization to Transact Business in Florida for Summer/Wise & Associates, P.C.

Dear Sir or Madam:

Enclosed is the Application by Foreign Corporation for Authorization to Transact Business in Florida for Summer/Wise & Associates, P.C., a Georgia corporation, along with a check in the amount of \$87.50 for the filing fee, a certificate of status, and a certified copy of the filing.

I appreciate your attention to this matter. Please do not hesitate to contact me if you have any questions or need additional information.

Sincerely,

Steve Pfeiffer

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GSP/rd

Enclosures

cc: Summer/Wise & Associates, P.C.

## TRANSMITTAL LETTER

TO:	Registration S Division of C		! ! !			
SUBJ	IECT:	Summer	∣ ∕Wise & Asso	ciates, P.C.		
				ion - must include suffix)		· · · · · · · · · · · · · · · · · · ·
Dear S	Sir or Madam:					
"Certi		nce", and cl		or Authorization to Transac register the above referen		
Please	return all corre	espondence	concerning this matt	er to the following:		•
			Steve Pfe	iffer		
		<del></del>	(Name	of Person)		<del></del>
			Theriaque	& Pfeiffer		
			(Firm/C	Company)	·	
			1114 East	Park Avenue		TAI SI
			(Ad	dress)		SE E
			Tallahass	ee, Florida 3230	01	EAS
			(City/State	e and Zip code)		SE SE
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For fu	rther informatio	on concernit	ig this matter, please	call:		II: 12 STATE LORID
Ste	ve Pfeiff	fer _	at (850	) 224-7332		<b>&gt;</b>
	(Name of Per	rson)		Code & Daytime Telepho	one Number)	
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Regist Division 409 E.	ET ADDRESS ration Section on of Corporation Gaines St. assee, FL 3239	ons	· · · · · · · · · · · · · · · · · · ·	MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns	
Enclos	ed is a check fo	or the follow	ving amount:			
<b>□</b> \$70	0.00 Filing Fee		75 Filing Fee & ifficate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Fill Certificate Certified	e 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.

Summer	r/Wise &	ASSOCI	.ates	5, P.C							
(Enter name of "Inc.," "Co.," "				RPORAT	ED,"	"COMPANY,"	"CORI	PORATION,	,		
(If name unava	ailable in Flor	ida, enter alte	mate c	orporate n	ame ac	dopted for the pu	rpose o	f transacting	business	in Flori	 da)
Georgi	ia				3.	58-1795	040	_			
(State or countr	ry under the la	w of which i	is inco	rporated)		(F	EI nun	ber, if applic	able)		
06/01/	/1988				5	Perpetu	ıal	<u>-</u>			
(Da	ate of incorpor	ration)	- ;		•	(Duration: Year	corp. v	vill cease to ex	xist or "	perpetua.	l")
	qualific		i								
(Date first trans	sacted busines					ransacted busines 507.1502 and 811			upon qu	alificatio	on.")
1900 (	Century	Blvd.,	NE,	Suite	3,	Atlanta,	GA	30345	-		
			(Princ	ipal office	addre	ss)			_	<del></del>	
1900 (	Century	Blvd.,	NE,	Suite	3,	Atlanta,	GA	30345		ŞE ŞE	40
			(Curre	nt mailing	addre	ss)	**		119 m A	NE SE	833
	tectural		<u>'</u>	.,			<u></u>			TARY	23
(Purpose	e(s) of corpora	ation authoriz	ed in ho	ome state	or cou	ntry to be carried	out in	state of Florid	ia)		3
Name and st	reet address	s of Florida	regist	ered age	nt: (I	P.O. Box or Ma	il Drop	Box NOT	accepta	ble ST	
Name:	CT Corp	oration	Sys	stems	<del> </del>	<del></del>		_		TE A GIN	12
	1200 Sc	outh Dir	ie To	aland	Roa	đ					
ffice Address:		Jucii Fii					٠.	- ur		٠.	
ffice Address:	Plantat			-		, Florida <u></u>	3324	4		٠.	

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.

PETER F. SOUZA ASSISTANT SECRETARY

(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

Chairman:	Summer, John H.
Address:	1892 Mt. Brian Road, NE
<del></del>	Atlanta, GA 30329
Vice Chairman:	
Address:	the state of the s
	· · · · · · · · · · · · · · · · · · ·
Director:	Summer, John H.
Address:	1892 Mt. Brian Road, NE
	Atlanta, GA 30329
Director:	Wise, John R.
Address:	2810 Livsey Trl.
	Atlanta, GA 30084
B. OFFICER	S P P P P P P P P P P P P P P P P P P P
President:	Wise, John R.
	2810 Livsey Trl.
	Atlanta, GA 30084
Vice President:	ORIU ORIU
	<b>D</b>
Secretary:	Miller, Peggy Sue
	3808 Greenrock Ct., Atlanta, GA 30340
Treasurer:	Miller, Peggy Sue
Address:	3808 Greenrock Ct., Atlanta, GA 30340
NOTE: If nec	cessary, you may attach an addendum to the application listing additional officers and/or directors.
13.	ARE
	(Signature of Director or Officer listed in number 12 of the application)
14.	(Typed or printed name and capacity of person signing application)

MIRESIDIENT /CEO

# **Secretary of State**

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

DOCKET NUMBER : 040330734

CONTROL NUMBER : J810465

DATE INC/AUTH/FILED: 06/01/1988

JURISDICTION : GEORGIA

PRINT DATE : 02/02/2004

FORM NUMBER : 211

THERIAQUE & PFEIFFER
S. BRENT SPAIN
1114 EAST PARK AVE.
TALLAHASSEE, FL 32301

#### 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

#### SUMMER/WISE & ASSOCIATES, P.C. A PROFESSIONAL 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 Annatated 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 power named entity as of the date issued. 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 the 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 said entity is in existence or is authorized to transact business in this state.



Cathy Cox Secretary of State