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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (877) 527-3463  
Fax Number : (305) 675-2811

**FOREIGN PROFIT QUALIFICATION**  
**INTERNATIONAL CATASTROPHE SOLUTIONS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

FILED  
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DIVISION OF CORPORATIONS  
04 JUL 28 AM 10:40

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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.*

**1. INTERNATIONAL CATASTROPHE SOLUTIONS, 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)

**2. GEORGIA**

(State or country under the law of which it is incorporated)

**3. 05-0562899**

(FEI number, if applicable)

**4. 03/27/2003**

(Date of incorporation)

**5. PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

**6. 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.)

**7. 4000 WENDELL DR.**

**ATLANTA, GA 30336**

(Principal office address)

(Current mailing address)

**8. MOLD REMEDIATION AND WATER / FIRE DAMAGE RESTORATION.**

(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: **AIA Registered Agent Inc.**

Office Address: **92 Sadberry Road**

**Quincy**

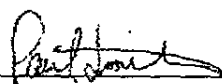
(City)

, Florida **32351**

(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.*

 **Paul Smith V.P.**

(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:**

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#### A. DIRECTORS

Chairman: COREY B. PITTS

Address: 1656 HARLINGTON ROAD

SMYRNA, GA 30082

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

#### B. OFFICERS

President: COREY B. PITTS

Address: 1656 HARLINGTON ROAD

SMYRNA, GA 30082

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: BILLIE PITTS

Address: 1656 HARLINGTON ROAD

SMYRNA, GA 30082

Treasurer: COREY B. PITTS

Address: 1656 HARLINGTON ROAD

SMYRNA, GA 30082

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

13. [Signature]  
(Signature of Director or Officer listed in number 12 of the application)

14. COREY B. PITTS, PRESIDENT  
(Typed or printed name and capacity of person signing application)

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DIVISION OF CORPORATIONS

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

CONTROL NUMBER : 0317213  
DATE INC/ANTR/FILED : 03/27/2003  
JURISDICTION : GEORGIA  
PRINT DATE : 07/28/2004  
FORM NUMBER : 211

INTERNATIONAL CATASTROPHE SOLUTIONS, INC.  
CORY PITTS  
4000 WENDELL DRIVE  
ATLANTA, GA 30336

### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of Georgia, do hereby certify under the seal of my office that as of the above print date

INTERNATIONAL CATASTROPHE SOLUTIONS, 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.

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.

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*Cathy Cox*  
Cathy Cox  
Secretary of State

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

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COREY PITTS  
4008 WENDELL DRIVE  
ATLANTA, GA 30336

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*Cathy Cox*  
Cathy Cox  
Secretary of State

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