

F04000004616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

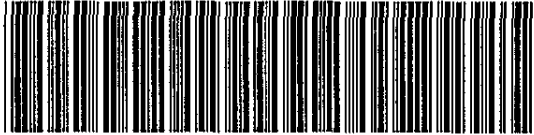
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
W04-28788      4099

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07/22/04--01034--004 \*\*78.75

04 AUG 12 AM 8:16



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

July 28, 2004

DWAYNE WEST  
1400 NASHVILLE CITY CENTER  
511 UNION STREET  
NASHVILLE, TN 37219

SUBJECT: AAT, INC.  
Ref. Number: W04000028788

We have received your document for AAT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name 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) 245-6890.

Jason Merrick  
Document Specialist

Letter Number: 904A00047300

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Division of Corporations

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AAT, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Dwayne West  
(Name of Person)  
Gresham, Smith and Partners  
(Firm/Company)  
1400 Nashville City Center, 511 Union Street  
(Address)  
Nashville, TN 37219  
(City/State and Zip code)

For further information concerning this matter, please call:

Dwayne West at ( 615 ) 770-8475  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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DIVISION OF CORPORATIONS

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. AAT, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

AAThweatt, Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Tennessee 3. 62-1342134 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/30/1987 5. Perpetual (Date of incorporation) (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. 1400 Nashville City Center, 511 Union Street (Principal office address)

Nashville, TN 37219 (Current mailing address)

8. Ownership interest in Gresham, Smith and Partners (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: Joe Thompson

Office Address: 5220 Belfort Road, Suite 100

Jacksonville, Florida 32256 (City) (Zip code)

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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.

[Signature] (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: Albert A. Thweatt

Address: 1400 Nashville City Center, 511 Union Street, Nashville, TN 37219

Vice Chairman: Pamela Thweatt

Address: 1400 Nashville City Center, 511 Union Street, Nashville, TN 37219

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

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

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

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

**B. OFFICERS**

President: Albert A. Thweatt

Address: 1400 Nashville City Center, 511 Union Street, Nashville, TN 37219

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

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

Secretary: Pamela Thweatt

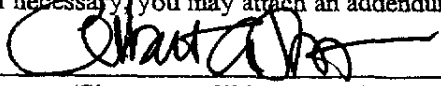
Address: 1400 Nashville City Center, 511 Union Street, Nashville, TN 37219

Treasurer: \_\_\_\_\_

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

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

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Albert A. Thweatt, President

(Typed or printed name and capacity of person signing application)

**Secretary of State**  
Division of Business Services  
312 Eighth Avenue North  
6th Floor, William R. Snodgrass Tower  
Nashville, Tennessee 37243

ISSUANCE DATE: 06/29/2004  
REQUEST NUMBER: 04181545  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 12/30/1987  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0198701  
JURISDICTION: TENNESSEE

TO:  
LAURA BLACK-HARWELL HOWARD  
315 DEADERICK ST  
STE 1800  
NASHVILLE, TN 37238

REQUESTED BY:  
LAURA BLACK-HARWELL HOWARD  
315 DEADERICK ST  
STE 1800  
NASHVILLE, TN 37238

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT  
-----  
"AAT, INC."

-----  
IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF  
INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE  
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED  
WITH THIS OFFICE; AND  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

-----  
FOR: REQUEST FOR CERTIFICATE

ON DATE: 06/29/04

FROM:  
HARWELL HOWARD HYNE GABBERT & MANNER  
315 DEADERICK STREET  
1800 1ST AMER CENTER  
NASHVILLE, TN 37238-1800

RECEIVED:           FEES  
                          \$160.00           \$0.00  
TOTAL PAYMENT RECEIVED:       \$160.00

RECEIPT NUMBER: 00003545466  
ACCOUNT NUMBER: 00000511



*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE