000004764

00789-04099-00411-00671

(Requ	uestor's Name)	
(Addr	ess)	
(Addi	ess)	<u></u>
(City/	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name	е)
(Doci	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
0/10/	TYC	
alt	Na	NC
C	US_	

Office Use Only mod-297391

100039517291

Min

08/02/04--01049--019 **78.75



Florida Secretary of State Secretary of State 409 East Gaines St. Tallahassee, FL 32399

Thursday, July 29, 2004

Dear Florida Secretary of State,

Please find enclosed the Certificate of Authority application and fee for LHR, Inc..

They have hired Cornerstone Support, Inc. to file this on their behalf. If you have any questions please feel free to call me at 770-587-4595.

Please mail any correspondence to:

Cornerstone Support, Inc.

Attn: Lisa Edwards

16 Norcross St. __ Suite 101

Roswell, GA 30075

Sincerely,

Lisa Edwards

Licensing Specialist ...

Cornerstone Support, Inc.

** Commissionesupport.com

16 Norcross Street

Suite 101

Roswell, Georgia 30075

770.587.4595

Fax 770.587,2440

TRANSMITTAL LETTER

_	tration Section on of Corpor			
SUBJECT:	LHR INC.		·	
		(Name of corpo	ration - must include suffix)	
Dear Sir or M	adam:			
The enclosed "Certificate of to transact bus	Existence",	and check are submitted	for Authorization to Transa to register the above refere	act Business in Florida", inced foreign corporation
Please return a	ıll correspon	dence concerning this m	atter to the following:	
		Cristy	Hall	
		(Nam	e of Person)	
			e Support, Inc.	
		(Finn	/Company)	7 .
			ss St. Suite 101	
		•	Address)	•
			II, GA 30075	
		(City/St	ate and Zip code)	······································
For further inf	formation con	cerning this matter, plea	use call:	
Cristy Ha	II_	at (770-587-4595	
(Nam	e of Person)	(A	770-587-4595 rea Code & Daytime Teleph	one Number)
Registration S Division of Co 409 E. Gaines Tallahassee, F	ection orporations St.		MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231	ons 4
Enclosed is a	heck for the	following amount:		
□ \$70.00 Fili	ng Fee 🛚 💆	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 4, 2004

LISA EDWARDS CORNERSTONE SUPPORT, INC. 16 NORCROSS ST., SUITE 101 ROSWELL, GA 30075

SUBJECT: LHR INC.

Ref. Number: W04000029739

We have received your document for LHR 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.

The registered agent must sign accepting the designation.

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) 245-6967.

Letter Number: 204A00048567

Michelle Hodges Document Specialist

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE 97TH SECTION 60 7.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Name of corpo words or abbre	dba Lewis Hastie Receivable oration; must include the word "INCORPOR eviations of like import in language as will do or partnership if not so contained in the name	ATED' early in	',''COMPANY'', "CORPORATION" or ndicate that it is a corporation instead of a		
2.	NY	3.	16-1512320		
	y under the law of which it is incorporated)		(FEI number, if applicable)	-	
4.	12/10/96	.5	Perpetual		
(Da	ate of incorporation)	(1	(Duration: Year corp. will cease to exist or "perpetual")		
6. upon quali	fication				
(Date first trans			ansacted business in Florida, insert "upon qualification.") 07.1502 and 817.155, F.S.)		
7. 56 Main St.	Hamburg	N	JY 14075		
	(Principal office	address	s)		
	(Current mailing	addres	s)		
8. Debt Colle	ection				
(Purpose	e(s) of corporation authorized in home state	or count	try to be carried out in state of Florida)	entito).	
9. Name and st	<u>reet address</u> of Florida registered ago	ent: (P.	.O. Box or Mail Drop Box NOT acceptable)	11	
Name:	Corporation Service Company			T	
Office Address:	1201 Hays Street	<u> </u>	- AM 00 F1 S2301	O	
	Tallahassee		, Florida 32301		
	(City)		(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.

Louise B. Smith, Asst. Vice President (Registered agent's signature)

I 1. 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: Wayne Brian Lewis		
Address:		· ·
		'
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		
Address:		
		. <u>. </u>
B. OFFICERS		
President: Wayne Brian Lewis		<u></u>
56 Main St. Hamburg NY 14075		
·		
Vice President: David J Hastie		
Address: 56 Main St. Hamburg NY 14075		
		· -
Secretary:		·
Address:		
Treasurer:		
Address:		
		••
NOTE: If necessary, you may attach an addendum to the applica	tion listing additional officers and/or directors	.
13. (Signature of Chairman, Vice Chairman, or any	officer listed in number 12 of the application)	
14. Wagne Lewis	resident	
(Typed or printed name and capacity of	person signing application)	

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of LHR INC. was filed on 12/10/1996, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 21st day of July two thousand and four.

200407220333 45

Secretary of State