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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

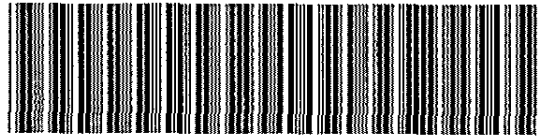
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CORE BUSINESS ADVISORS, 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:

Stephen E. Capizzi
(Name of Person)

CORE BUSINESS ADVISORS, INC.
(Firm/Company)

3700 MANSELL ROAD, SUITE 220
(Address)

ALPHARETTA, GA 30022
(City/State and Zip code)

For further information concerning this matter, please call:

Stephen E. Capizzi at (770) 625-5050
(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

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

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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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. CORE BUSINESS ADVISORS, 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 3. 58-2098324
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2-21-94 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. HAVE NOT TRANSACTED BUSINESS IN FLORIDA BEFORE
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3700 MANSSELL ROAD, Suite 220, ALPHARETTA, GA 30022
(Principal office address)
- 3700 MANSSELL ROAD, Suite 220, ALPHARETTA, GA 30022
(Current mailing address)

8. SALE REAL ESTATE/BUSINESSES
(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 NOT acceptable)

Name: NRAI Services Inc.

Office Address: 526 E. PARK Avenue

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.

Regina Clerkin, Assistant Secretary
(Registered agent's signature)
Regina Clerkin, Assistant Secretary

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

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Chairman: Stephen E. Capizzi
Address: 3700 MANSSELL ROAD, Suite 220
ALPHARETTA, GA 30022

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: Kimberly A. Capizzi
Address: 3700 MANSSELL ROAD, Suite 220, ALPHARETTA, GA 30022

Director: _____

Address: _____

B. OFFICERS

President: Stephen E. Capizzi
Address: 3700 MANSSELL ROAD, Suite 220
ALPHARETTA GA, 30022

Vice President: _____

Address: _____

Secretary: Kimberly A. Capizzi
Address: 3700 MANSSELL ROAD, Suite 220, ALPHARETTA, GA 30022
Treasurer: Stephen E. Capizzi
Address: 3700 MANSSELL ROAD, Suite 220, ALPHARETTA, GA 30022

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

13. Stephen E. Capizzi
(Signature of Director or Officer listed in number 12 of the application)

14. Chairman + President
(Typed or printed name and capacity of person signing application)

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

CONTROL NUMBER : K405132
DATE INC/AUTH/FILED: 02/21/1994
JURISDICTION : GEORGIA
PRINT DATE : 08/24/2004
FORM NUMBER : 211

CORE BUSINESS ADVISORS
STEVE CAPIZZI
3700 MANSELL ROAD
SUITE 220
ALPHARETTA, GA 30022

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

CORE BUSINESS ADVISORS, 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.

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Cathy Cox

Cathy Cox
Secretary of State