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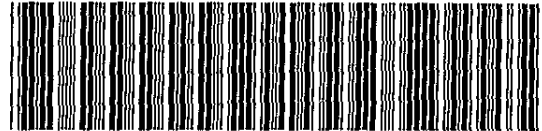
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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** EMERALD COAST BUSINESS SERVICES, 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:

DON R RIDER  
(Name of Person)  
EMERALD COAST BUSINESS SERVICES, INC.  
(Firm/Company)  
9685 SOLDIER CREEK RD  
(Address)  
LILLIAN, AL 36549  
(City/State and Zip code)

For further information concerning this matter, please call:

DON RIDER at (251) 962-2307  
(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**

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. EMERALD COAST BUSINESS SERVICES, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. ALABAMA 3. 20-1630631  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 13, 2004 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 9685 Soldier Creek RD, Lillian, AL 36549  
(Principal office address)

Same as above  
(Current mailing address)

8. Provide Business Services to Small 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: Pamela M Zierk

Office Address: 3260 Rothschild Dr  
Pensacola, Florida 32503  
(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.

Pamela M Zierk  
(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: DON R Rider

Address: 9685 Soldier Creek RD  
LILLIAN, AL 36549

Vice Chairman: VICKI L. Rider

Address: 9685 Soldier Creek RD  
LILLIAN, AL 36549

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

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

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

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

**B. OFFICERS**

President: DON Rider

Address: Same as above

Vice President: VICKI L. Rider

Address: Same as above

Secretary: VICKI L. Rider

Address: Same as above

Treasurer: VICKI L. Rider

Address: Same as above

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

13. Don Rider  
(Signature of Director or Officer listed in number 12 of the application)

14. DON R Rider - President  
(Typed or printed name and capacity of person signing application)

Nancy L. Worley  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Emerald Coast Business Services, Inc. incorporated in Baldwin County, Lillian, Alabama on July 13, 2004. I further certify that the records do not disclose that said Emerald Coast Business Services, Inc. has been dissolved.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

August 27, 2004

Date

*Nancy L. Worley*  
Nancy L. Worley

Secretary of State