

F04000006139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

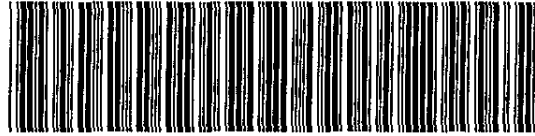
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

10/2/04
61

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ENTREPRENEUR, 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:

DIANE M. STEWART

(Name of Person)

ENTREPRENEUR, INC.

(Firm/Company)

P.O. BOX 3227

(Address)

WILMINGTON, NC 28406

(City/State and Zip code)

For further information concerning this matter, please call:

DIANE M. STEWART at (910) 796-2425
(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

W04-38426

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OCT 25 PM 2:09
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 19, 2004

DIANE M. STEWART
ENTREPRENEUR, INC.
P.O. BOX 3227
WILMINGTON, NC 28406

SUBJECT: ENTREPRENEUR, INC.
Ref. Number: W04000038426

We have received your document for ENTREPRENEUR, 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 entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 704A00059959

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TALLAHASSEE, FLORIDA

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

ENTREPRENEUR, INC. OF NC
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NORTH CAROLINA 3. 56-1034433
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/31/1973 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. 10 CARDINAL DRIVE, WILMINGTON, NC 28403
(Principal office address)

P.O. BOX 3227, WILMINGTON, NC 28406
(Current mailing address)

8. LEASING PROPERTY
(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)

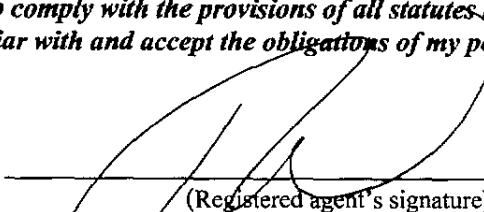
Name: BRICKLEMYER, SMOLKER & BOLVES, PA

Office Address: 500 E. KENNEDY BLVD, SUITE 200

TAMPA, Florida 33602
(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.


(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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OCT 25 PM 2:09
TAMPA, FLORIDA

199-297

A. DIRECTORS

Chairman: W. C. WORSLEY, JR

Address: 10 CARDINAL DRIVE, WILMINGTON, NC 28403

Vice Chairman: _____

Address: _____

Director: W. C. WORSLEY III

Address: 10 CARDINAL DRIVE, WILMINGTON, NC 28403

Director: _____

Address: _____

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SEAL
TALLAHASSEE, FLORIDA

B. OFFICERS

President: W. C. WORSLEY, III

Address: 10 CARDINAL DRIVE, WILMINGTON, NC 28403

Vice President: _____

Address: _____

Secretary: JEFFREY W. TURPIN

Address: 10 CARDINAL DRIVE, WILMINGTON, NC 28403

Treasurer: W. C. WORSLEY, JR

Address: 10 CARDINAL DRIVE WILMINGTON, NC 28403

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. W. C. WORSLEY, JR, CHAIRMAN

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



NORTH CAROLINA

Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

ENTREPRENEUR, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 31st day of January, 1973, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

FILED
OCT 12 2004
CLERK OF SUPERIOR COURT
RALEIGH, N.C.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 12th day of October, 2004

Elaine F. Marshall

Secretary of State