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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

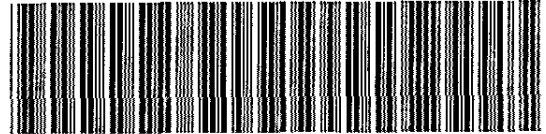
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DIVISION OF CORPORATION



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 954221 7460049  
AUTHORIZATION : *Patricia Pigjito*  
COST LIMIT : \$ 70.00

FILED  
04 NOV -4 PM 2:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : November 3, 2004

ORDER TIME : 10:51 AM

ORDER NO. : 954221-005

CUSTOMER NO: 7460049

CUSTOMER: Mr. Ernie Reed  
Mr. Ernie Reed  
Po Box 690224

Charlotte, NC 28227

FOREIGN FILINGS

NAME: REED'S RESIDENTIAL REPAIR INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER: \_\_\_\_\_

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. REED'S RESIDENTIAL REPAIR INC.

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

~~Reed's Repair, Inc.~~  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NORTH CAROLINA

(State or country under the law of which it is incorporated)

3. 03-0425328

(FEI number, if applicable)

4. April 11., 2002

(Date of incorporation)

5. Perpetual

(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. 627 South Riverhills Dr. Temple Terrace, Florida 33617

(Principal office address)

PO Box 690224 Charlotte, NC 28227

(Current mailing address)

8. Minor home repairs (painting, Drywall replacement, turnkey punch

(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: Corporation Service Company

Office Address: 1201 Hays Street

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.

By:

Corporation Service Company

(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: Ernie Reed

Address: PO Box 690224

Charlotte, NC 28227

Vice Chairman: Lisa Reed

Address: PO Box 690224

Charlotte, NC 28227

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

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

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

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

**B. OFFICERS**

President: Ernie Reed

Address: PO Box 690224

Charlotte, NC 28227

Vice President: Lisa Reed

Address: PO Box 690224

Charlotte, NC 28227


Secretary: Lisa Reed

Address: PO Box 690224 Charlotte, NC 28227

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

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

**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. Ernie Reed - President  
(Typed or printed name and capacity of person signing application)



# NORTH CAROLINA

## Department of The Secretary of State

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### CERTIFICATE OF EXISTENCE

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

#### **REED'S RESIDENTIAL REPAIR, INC.**

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 11th day of April, 2002, 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.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 3rd day of November, 2004

*Elaine F. Marshall*

Secretary of State