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(Requestor's Name)	
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
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SECRETARY OF STATE

Hotels Cart.

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DAVED BOOD 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:	
MUTO A ROOM	
(Name of Person)	
Routh Room Tim.	
(Firm/Company)	
14 1 PM 212-1	
(Address)	
NOHUNTA (NA 31543 EX B	
(City/State and Zip code)	ې-پ ا
(City/State and Zip code)	-
For further information concerning this matter, please call:	è
David Rud at (Area Code & Daytime Telephone Number Find W	alebia.
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 Sectificate of Status Sectified Copy Sectified Copy Sectified Copy Sectified Copy Certified Copy Certified Copy Section Sect	



January 27, 2005

DAVID A. REED DAVID REED, INC. RT 1 BOX 212-1 MAHUNTA, GA 31553

SUBJECT: DAVID REED INC. Ref. Number: W05000004367

We have received your document for DAVID REED INC. and your check(s) totaling \$70.00. 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.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6913.

Diane Cushing Document Specialist

Letter Number: 105A00005843



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 3, 2005

DAVID A. REED DAVID REED, INC. RT 1 BOX 212-1 MAHUNTA, GA 31553

SUBJECT: DAVID REED INC. doing business as DAVID A REED INC

Ref. Number: W05000004367

We have received your document for DAVID REED INC. doing business as DAVID A REED INC and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

You have not sent the proper certificate.

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) 245-6913.

Letter Number: 305A00007904

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (nder the law of which it is incorporated) (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Current mailing address) xed in home state or country to be carried out in state of Florida) (Purpose(s) of corporation author 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: Florida 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:

Chairman: AAA	
Address:	
Vice Chairman:	
Address:	
1441.033.	h
Director: Davial a. Recal	
DD 2012121	
Mal 1/2 (1-1) 21553	
Director:	
Address:	
B. OFFICERS	T _A co
President: DAVIOL A ROCK	2005 SECR
Address: <u>R41 Box 212-1</u>	HETA!
Na hula 6A 31553	E C
	Tr ST
Vice President:	- 22
Address:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additi	ional officers and/or directors.
13. David a. Zeul	application)

(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 : 0470832
DATE INC/AUTH/FILED: 11/29/2004
JURISDICTION : GEORGIA
PRINT DATE : 02/10/2005

FORM NUMBER : 211

DAVID REED, INC.
DAVID REED
RT1 BOX 212-1
NAHUNTA, GA 31553

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

DAVID REED. INC

ACCORDIN PROBLET CORPORATION

ACCORDINATION

*

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.

20050210171912447



Cathy Cox Secretary of State