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J. BRYAN JUL 1 5 2005

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Rockyn Thom (Name of c	orporation - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corpora" Certificate of Existence," and check are submitransact business in Florida.	ation for Authorization to Transact Business in Florida," utted to register the above referenced foreign corporation to	
Please return all correspondence concerning th		
William R Sizemore	Name of Person)	
Pockeyn Thomas, 11 7620 OLD Lesanon	Firm/Company)	
2620 OLD LEBANON	ROAD	
HASHVIlle, TN. 3721	4 SSC = I	
, (Ci	ty/State and Zip code)	
For further information concerning this matter,		
William Sizemore at ( (Name of Person)	615 642.3618  (Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	

409 E. Gaines St. Tallahassee, FL 32399 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.	The state of the s
1. KOCKLYN Thomas, INCORPORATED, "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	·
Section 1985 And the section of the	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. Tennessee 3. 33-1005362 (State or country under the law of which it is incorporated) (FEI number, if applicable)	,
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. Ol. 29.02 (Date of incorporation)  5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")	
6. N/A  (Date first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 7620 OLD LEBANON ROAD HASHVIlle, Tn. 37214 (Principal office address)	113
2620 OLD LEBAHON ROAD NASHVIlle, Tn. 37214	
(Current mailing address)	
8. DRYWALL AND Metal Stup Subcontracting	
(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: PKHATO L. JINKS	
	-
NICEVILLE, Florida 32578	
(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 $\overline{}$	
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.	
Richard L. Jmas	· <del>· ·</del>
(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:
Address:
<u> </u>
Vice Chairman:
Address:
English To the second s
Director:
Address:
Director:
Address:
B. OFFICERS
President: William R. Sizemore
Address: 2620 ap Lersanon Roso
NASHVIlle, Tn. 37Z14
Vice President:
Address:
Secretary:
Address:
Treasurer: DAHNY T. Campbell
Address: 85 E. H. 11 Street MT. Juliet, Tn. 37172
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Presions
(Signature of Director or Officer listed in number 12 of the application)
14. (Typed or printed name and capacity of person signing application)

Secretary of State Division of Business Services 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 07/07/2005 REQUEST NUMBER: 05188109 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/29/2002 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0421017 JURISDICTION: TENNESSEE

NASHVILLE, TN 37214

REQUESTED BY: WILLIAM R. SIZEMORE 2620 OLD LEBANON ROA NASHVILLE, TN 37214

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "ROCKLYN-THOMAS, INC."

S A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF NCORPORATION AND DURATION AS GIVEN ABOVE:
HAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE XISTENCE OF THE CORPORATION HAVE BEEN PAID:
HAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED WITH THIS OFFICE; AND HAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND HAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 07/07/05

RECEIVED:

FEE\$ \$20.00

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00003770032 ACCOUNT NUMBER: 00425391



FROM: ROCKLYN-THOMAS INC. 2620 OLD LEBANON RD

NASHVILLE, TN 37214-0000

RILEY C. DARNELL SECRETARY OF STATE