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## TRANSMITTAL LETTER

TO: Registration Se Division of Con				
SUBJECT: Wilder S	itructures, Inc.			
***************************************		ation - must include suffix)		
Dear Sir or Madam:				
	tion by Foreign Corporation te," and check are submitted rida.			
Please return all corresp	pondence concerning this ma	tter to the following:		
James R. Furis				
	(Name	e of Person)		
Wilder Structures				
	(Firm	/Company)		
19 Park Avenue				
	(A	(ddress)		
St. Augustine, FL 3208	4			
		ate and Zip code)		
For further information	concerning this matter, plea	se call:	IALA IALA	05 AUG
James R. Furis	at (678	858-0843		24 1
(Name of Pers		ea Code & Daytime Teleph	one Number)	05 AUS 24 AM 9: 2
STREET ADI Registration Se Division of Co 409 E. Gaines Tallahassee, FI	ection rporations St.	MAILING AN Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7	29
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	S87.50 Filing Fee, Certificate of Status &	&

### 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.

I. Wilder Structu					_	
	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"			
(If name unavai	able in Florida, enter alternate corporate na	une	adopted for the purpose of transacting business in	Florida)	<del>-</del>	
2. Georgia		3.	58-2576152		_	
	under the law of which it is incorporated)	•	(FEI number, if applicable)			
4. 12/07/2000		5.	Perpetual			
(Date	e of incorporation)		(Duration: Year corp. will cease to exist or "pe	rpetual")		
6. <u>N/A</u>					-	
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
7, 997 Commerce	Drive, Conyers, GA 30094				_	
	(Principal office	add	ress)		_	
19 Park Avenu	e, St. Augustine, FL 32084				_	
	(Current mailing	add	ress)			
8. Building Contra	actor					
	s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)	-	_	
9. Name and stre	et address of Florida registered agent: (	(P.C	). Box NOT acceptable)	ZES	05 AUG 24	
Name:	James R. Furis		**************************************		JG 2	<u> </u>
Office Address:	19 Park Avenue			- Fig. 1		FILED
	St. Augustine		, Florida 32084	-1: -1:	M 9: 30	
	(City)		(Zip code)		30	
	gent's acceptance:			معنف		
			ice of process for the above stated corporation			

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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## **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0053492
DATE INC/AUTH/FILED: 12/07/2000
JURISDICTION : GEORGIA
PRINT DATE : 08/19/2005
FORM NUMBER : 211

WILDER STRUCTURES
JIM FURIS
19 PARK AVENUE
ST. AUGUSTINE, FL 32084

#### 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

WILDER STRUCTURES, INC.
A GEORGIA PROPIT CORPORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above case and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

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.

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Cathy Cox Secretary of State