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(F	Requestor's Name)	
	Address)	
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(/	Address)	
	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(1	Business Entity Name)	
(I	Document Number)	
Certified Copies	Certificates of	Status
W		
Special Instructions	to Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: T.S.I. Contracting Services, 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 transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
Shallow Alwards.		
(Name of Person)		
TSI Contracting, Inc		
(Firm/Company)		
5295 Lake Pointe Center Dr. Ste J	2	
(Address)	OS NOV	
Cumpung CA 30041		
(City/State and Zip code)		
	17 AM IO: 4-6	
For further information concerning this matter, please call:		
	温 ま	
Shelley Murphy at (770) 886 7777		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: MAILING ADDRESS:		
Registration Section Registration Section Division of Corporations Division of Corporations		
Clifton Building P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32314		
Tailahassee, FL 32301		
Enclosed is a check for the following amount:		
14 -6:00 Filing Fee 2 \$78.75 Filing Fee & 578.75 Filing Fee & \$87.50 Filing Fee	3 .	
Certificate of Status Certified Copy Certificate of Status	atus &	
Certified Copy		



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 9, 2005

SHELLEY MURPHY 5295 LAKE POINTE CENTER DR STE J CUMMING, GA 30041

SUBJECT: T.S.I. CONTRACTING SERVICES, INC.

Ref. Number: W05000050433

We have received your document for T.S.I. CONTRACTING SERVICES, 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):

A brief description of the entity's nature of business must be included in the document.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 605A00066901

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.

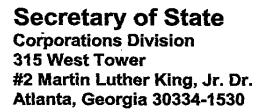
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
T.S.I. Contracting Services, Inc	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
- Calma Aina Tua	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
60 001 6001	
2. 6A 3. 58·236·5334	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. <u>Jan. 20, 1448</u> 5. <u>Perpetual</u>	
(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)	
5295 LOVO Private Contar Dr Stot Cun number Small	
(Principal office address)	
2000	
(Current mailing address)	
8 general Contracting, marrier for exterior painting	
(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)	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: May K Tyomas Office Address: 10725 Graysm (+	
Name: May C 1 VIOTY as	7
Office Address: 10 20 911.944 91	בורבול
Jacksmyille Florida 2220	C
(City) (Zip code)	
A ^m 5	
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.	
une i un junium min une uccept me oonganons of nef position as registered agent	

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.

Registered agent's signature)

12. Names and business addresses of officers and/or directors:

A. DIRECTORS NA	
Address:	
Vice Chairman:	
Address:	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	
Director;	<u> </u>
Address:	
Director:	
Address:	
B. OFFICERS	
President: Staffan Schumaches	7 0
Address: 596 Gold Crest Dr	SECHE
Dalvonega 64 30533	
Vice President:	
Address:	
Secretary: Panela Schumaeha	<u> </u>
	na 6a 20582
	ya ca 20022
Treasurer:	<u></u>
Address:	
NOTE: If necessary, you may attach an addendum to the application listing	g additional officers and/or directors.
13. X AMMALIN	
Signature of Director or Officer listed in number 12 of Steffen Schumacher Out	
(Typed or printed name and capacity of person sign	



CONTROL NUMBER : K803308
DATE INC/AUTH/FILED: 01/20/1998
JURISDICTION : GEORGIA
PRINT DATE : 10/14/2005
FORM NUMBER : 211

TSI CONTRACTING
SHELLEY MURPHY
5295 LAKE POINTE CENTER DRIVE
SUITE J
CUMMING, GA 30041

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

A GEORGIA PROFIT 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 date and has not filed articles of dissolution, certificate of cancellation of 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.

20051014154605049



Cathy Cox Secretary of State