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(Re	questor's Name)	-		
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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COVER LETTER

TO: New Filing Section Division of Corporations					
SUBJECT: J. L. O'Brien & Associates, 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:					
Jay O'Brien					
(Name of Person)					
J. L. O'Brien & Associates, Inc.					
(Firm/Company)					
P.O. Box 70276					
(Address)					
Mobile, AL 36670					
(City/State and Zip code)					
For further information concerning this matter, please call:					
Jay O'Brien (Name of Person) at (251) 661-8100 (Area Code & Daytime Telephone Number)					
(Name of Person) (Area Code & Daytime Telephone Number)					
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Close Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations Pivision 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 \$\$2 \$78.75 Filing Fee \$\$378.75 Filing Fee \$\$378.75 Filing Fee \$\$387.50 Filing Fee, Certificate of Status \$\$387.50 Filing Fee, Certified Copy					

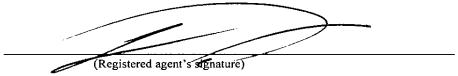
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

* ·	rien & Associates, inc.			_
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"		
me., co., c	orp, me, co, or corp.)			
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting bus	iness in Florida	.)
_{2.} Alabama	1 3.	63-0891128		
(State or country	under the law of which it is incorporated)	(FEI number, if applicabl	e)	_
4. January	10, 1985	Perpetual		
(Date	of incorporation)	(Duration: Year corp. will cease to exist	t or "perpetual"))
6. Not Appl	icable			
 		n Florida, if prior to registration) 502, F.S., to determine penalty liability)		_
1621 Hni	versity Blvd. South, Suite		າດ	
7. 1021 0111	(Principal office add			_
P.O. Box 70276, Mobile, AL 36670		96 98 98		
F.O. BOX	(Current mailing add		F 3	
	(,	R 24 ASSI	
8. Real Est	ate		r i	77]
(Purpose(s	e) of corporation authorized in home state or co	ountry to be carried out in state of Florida)		
9. Name and stree	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	FIX 12: 42	
Name:	Michael Barrow		D N	
Office Address:	34851 Emerald Coast Pk	<u>xwy</u> Suite 150		
	Destin	, Florida 32541		
	(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.



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: ___ Vice Chairman: _________ Address: Director: Jerome L. O'Brien Address: P.O. Box 70276 Mobile, AL 36670 Director: Jerome L. O'Brien, Jr. Address: P.O. Box 70276 Mobile, AL 36670 **B. OFFICERS** President: Jerome L. O'Brien Address: P.O. Box 70276 Mobile, AL 36670 Vice President: Jerome L. O'Brien, Jr. Address: P.O. Box 70276 Mobile, AL 36670 Secretary: Jerome L. O'Brien Address: P.O. Box 70276, Mobile, AL 36670 Treasurer: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

14. Jerome L. O'Brien - Director

Nancy L. Worley Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that J. L. O'Brien & Associates, Inc. incorporated in Mobile County, Mobile, Alabama on January 10, 1985. I further certify that the records do not disclose that said J. L. O'Brien & Associates, Inc. has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

March 17, 2006

Date

Many & Auley

Nancy L. Worley

Secretary of State