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(Re	questor's Name)	_		
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Project Wayaco (Name of corpo	ment i Marketing, Inc.		
Dear Sir or Madam:			
	n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation to		
Please return all correspondence concerning this n	natter to the following:		
Diane S. Baker			
(Nai	ne of Person)		
Project Management : N	larketing, Inc.		
(Firm	m/Company)		
205 Sloan Street			
	Address)		
Roswell, GA 30075			
(City/S	state and Zip code)		
For further information concerning this matter, ple	ase call:		
Diane S. Baker at (7)	70 1-374-7111		
(Name of Person) (A	area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
New Filing Section	New Filing Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314		
Enclosed is a check for the following amount:			
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy		

APPLICATION BY FOREIGN CORPORATION FUR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

10

REGISTER A FOR	reign corporation to th et Wanzoement	LANSACT BU	TUTES. THE FOLLOWING IS SUBMITTED SINESS IN THE STATE OF FLORIDA. "KETING INC. "COMPANY," "ORPORATION,"			
(U mane mavaile	•	ocawie manie ad	opted for the purpose of transacting business in 1	Florida)		
	whiles the law of which it is incorp	orated)	(FEI manber, if applicable)			
4. 055	10-61	5.	mer netwal			
	of incorporation)	(Duration: Year corp. will ocuse to exist or "perp	xetual")		
G	~ ps/A	-				
	(Date first transacto	d business in F	lorida, if prior to registration) L. F.S., to determine pensity liability)			
7. <u>205</u> 5	loan Street	I office addres	xell, GA 30075	-1 ,		
20 5 5	Sloan Street		well. GA 30075			
		mailing addres	(s)			
-	-	•				
8. <u>Kezil</u> F	Estate Eroker			A	2006	
(Purposo(s) of corporation authorized in hom	ec state or colar	ntry to he carried out in state of Florida)	Z.S.		
9. Name and stree	t address of Florida registered a	agent: (P.O.	Box NOT acceptable)	LAHASSE	MAR	7
Nerse:	JOHN R. BARA	Char S		SE	29	
					2 2	
Office Address:	2893 S. Ponte	PANA P	LVD.	10.1 71.S		_
	Ponte Vedra Bea	reh_	, Florida 32082	H G	8. :	
	(City)		(Zip code)		ω	
Having been now designated in this further agree to c	application, I hereby accept the	ke appointme Li statutes rel	e of process for the above stated corporation into a registered agent and agree to act in the wive to the proper and complete performantion as registered agent.	kis capacity. I	·	

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 baving 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 Chairman: ______ Address: Director: Address: __ Director: __ Address: ______ B. OFFICERS President: Diane S. Baker Address: 205 Sloan St Roswell, GA 30075 Vice President: Terry Baker Address: 205 Slozan St. Roswell GA 30075 205 Sloan St Roswell, GA 30075 Treasurer: Address: ____ 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)

President

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0122686 DATE INC/AUTH/FILED: 05/11/2001 : GEORGIA JURISDICTION PRINT DATE : 03/23/2006

FORM NUMBER

PROJECT MANAGEMENT & MARKETING DIANE BAKER 205 SLOAN STREET ROSWELL, GA 30075

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

PROJECT MANAGEMENT & MARKETING, INC. 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 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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Secretary of State