

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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COVER LETTER

TO: New Filing S Division of G			
SUBJECT:	ELLINGTO	N PROPERTIE	s, Corp.
	(Name of corpo	ration - must include suffix)
Dear Sir or Madam:			
	cation by Foreign Corporation ence," and check are submitted Florida.		
Please return all corre	espondence concerning this m	atter to the following:	
N1ATTH	EN ELLIN		
T., -		ne of Person)	
<u> </u>	IGITON PROPER	TIES CORP.	
onna A.			· <u>-</u> .
2111 CL	AIRMONT RD	STE. F-Z Address)	
ATLANTI	,	7 9	<u></u> .
	$\frac{A}{A}$, $\frac{A}{A}$, $\frac{A}{A}$ (City/S	tate and Zip code)	
	, ,	•	
For further information	on concerning this matter, plea	ase call:	
* 1			
MATHEW (Name of Pe	ELLINGON at (9 (A	54) 254-13	589
(Name of Pe	rson) (A	rea Code & Daytime Telep	none Number)
	OURIER ADDRESS:	MAILING A	
New Filing S Division of C		New Filing S Division of O	
Clifton Build		P.O. Box 632	
2661 Executi Tallahassee,	ve Center Circle FL 32301	Tallahassee,	FL 32314
Enclosed is a check for	or 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 FÖLLOWING IS SÜBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. ELLINGTON PROPERTIES CORP.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) RD. STE. F-Z ATLANTA, GA (Principal office address) HOUSING AND CUMMERCIAL DEVELOPMENT
(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: Office Address: 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:	- FILEN
A. DIRECTORS	OG APD
A. DIRECTORS Chairman: ANYA HURPE Address: 59 Alimble WOOD TRAIL ACWORTH GA 30101	SECRETARY CT
Address: 59 ALIMBLE WOOD TRAIL	ALLAHASSE OF STATE
ACWORTH, GA 30101	LOIPO S
Vice Chairman:	
Address: 147 KATHRYN DRIVE	
MARIETTA, GA 30066	
ř	··
Director:	,
Address:	
Director;	· · · · · · · · · · · · · · · · · · ·
Address:	
B. OFFICERS	
President: TANYA THOR PE	 *
Address: 59 NIMBLE WOOD TRAIL	
ACWORTH, GA 30101	· ·
Vice President: CARELIA CUICRET	
liter was at 1	•
• —	
Secretary: DONNETTH KOBINSON	27771
Address: 921 NW 6 ST. 40M PAND BEACH F	L 33060
Treasurer: DUNNETTA KOBINSON	<u> </u>
Address: 427 NW Goth ST POMPANO BEACH, IL.	33060
	ŕ
NOTE: If necessary, you may attach an addendum to the application listing additional office	ers and/or directors.
13. Comp Thorpe (Signature of Director or Officer listed in number 12 of the application	<u> </u>
A	9
14. TANYA THURPE CHAIRMAN, CEO (Typed or printed name and capacity of person signing application)	

Secretary of State

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

ELLINGTON PROPERTIES, CORP. MATTHEW ELLINGTON 1005 CREEKDALE DRIVE CLARKSTON, GA 30021

CONTROL NUMBER : 0475231 DATE INC/AUTH/FILED: 12/17/2004 JURISDICTION : GEORGIA PRINT DATE : 04/03/2006

FORM NUMBER : 211

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office? print date 💷 that as of

> ELLINGTON PROPERTIES, A GEORGIA PROFIT

is in compliance with the applicable filing egistration 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 Secret

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 States. the Secretary of State

This information is issued and certified 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