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# **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Accent Marketing Group, 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:  Sherry Sagemiller (Name of Person)
Accent Marketing Group, Inc.  Name of Person)
12273 Emerald Coast Pkwy, Svite 113 (Address)
Drotin, FL. 32550 (City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: New Filing Section Division of Corporations Division 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 \$\$ \$78.75 Filing Fee \$\$ Certificate of Status \$78.75 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 FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Enter name of corporation; must include "INCORPORATION," "COMMANY," "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) 5. (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Emerald Coast
(Principal office address) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: morald Coast Pluy, Svire 113 Office Address: , Florida **F 32**550 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 and qualifying Broken	
Chairman: Sherry Sagemiller	<del></del>
Address: 4577 Navical Coort	<del></del>
Destin FL 3254	- <del> </del>
Vice Chairman:	
Address:	TARM ASSE
Director: Gary T. Sageniller	7.07.7 8.
Address: 457 Nautical Court	50 15A
Destin, PL 32541	
Director:	
Address:	
B. OFFICERS and Qualifying Broken	
President: Sherry Sagemiller	
Address: 4577 Nautical Court	
Dartin, FL 32541	
Vice President:	
Address:	
Secretary: Gay T. Sagemiller	
Address: 457) Nautical Court Destin, 1	PL 32541
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office	ers and/or directors.
13. Signature of Director or Officer listed in number 12 of the application	<u> </u>
14. Sherry Sasemiller Pres.	<u> </u>
(Typed or printed name and capacity of person signing application)	Broken

# Secretary of State

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

ACCENT MARKETING GROUP SHERRY SAGEMILLER 12273 EMERALD COAST PKWY DESTIN, FL 32550

: J805407 CONTROL NUMBER DATE INC/AUTH/FILED: 03/15/1988 JURISDICTION

PRINT DATE FORM NUMBER : GEORGIA : 03/08/2006 : 211

### CERTIFICATE OF EXISTENCE

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

> ACCENT MARKETING GROUE, A GEORGIA PROBIT 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 normed 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

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 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