(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Pt	none #)	
PICK-UP WAIT	MAIL	
(Business Estitu	Nama	
(Business Entity Name)		
(Document Number)		
Certified Copies Certific	ates of Status	
Special Instructions to Filing Officer:		

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W

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: TRAVIS DESIGN ASSOCIATES, P.C.		
(Name of corporation - must include suffix)		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," and check are submitted to restransact business in Florida.		
Please return all correspondence concerning this matter t	o the following:	
Grace Kalil		
(Name of Person)		
Travis Design Associates		
(Firm/Con	pany)	
200 Caughman Farm Lane		
(Address)		
Lexington, SC 29072		
(City/State and Zip code)		
For further information concerning this matter, please cal	11:	
Grace Kalil at (803) 358-0265		
(Name of Person) (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:		
	\$78.75 Filing Fee & Ser.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 7, 2006

GRACE KALIL TRAVIS DESIGN ASSOCIATES 200 CAUGHMAN FARM LANE LEXINGTON, SC 29072

SUBJECT: TRAVIS DESIGN ASSOCIATES, P.C.

Ref. Number: W06000048653

We have received your document for TRAVIS DESIGN ASSOCIATES, P.C. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2007 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the original and one copy of 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) 245-6962.

Valerie Herring Document Specialist New Filing Section

Letter Number: 006A00065542

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.

Georgia	
	3. 58-2263378 (FEI number, if applicable)
(State or country under the law of which it is incorporate	ated) (FEI number, if applicable)
8/9/1996	5
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpendal")
	<u> </u>
(Date first transacted by (SEE SECTIONS 607.1501	(Duration: Year corp. will cease to exist or "perpendal") Solutions in Florida, if prior to registration) & 607.1502, F.S., to determine penalty liability) Lexington, SC 29072 Office address) Lexington, SC 29072
200 Caughman Farm Lane,	Lexington, SC 29072
(Principal o	office address)
200 Caughman Farm Lane,	Lexington, SC 29072
	ailing address)
English spins a second time	
Engineering consulting	
	state or country to be carried out in state of Florida)
	·
(Purpose(s) of corporation authorized in home s	ent: (P.O. Box NOT acceptable)
(Purpose(s) of corporation authorized in home so Name and street address of Florida registered age Name: Corporation Section S	ent: (P.O. Box <u>NOT</u> acceptable) Cruce CO.
(Purpose(s) of corporation authorized in home so Name and street address of Florida registered age Name: Corporation Section S	ent: (P.O. Box <u>NOT</u> acceptable) <i>Cruce C</i> O.

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:	PACON FILLE
A. DIRECTORS	SECRETARY OF STATE DIVISION OF CORPORATIONS
Chairman: Alice M. Travis, P.E.	06 NOV 17 AM 11: 58
Address: 200 Caughman Farm Lane	
Lexington, SC 29072	
Vice Chairman: Raulston L. Travis, P.E.	
Address: 200 Caughman Farm Lane	
Lexington, SC 29072	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Alice M. Travis, P.E.	
Address: 200 Caughman Farm Lane	
Lexington, SC 29072	
Vice President: Raulston L. Travis, P.E.	
Address: 200 Caughman Farm Lane	
Lexington, SC 29072	
Secretary: Raulston L. Travis, P.E.	
Address: 200 Caughman Farm Lane, Lexington, S	C 29072
Treasurer: Alice M. Travis, P.E.	
Address: 200 Caughman Farm Lane, Lexington, S	C 29072
NOTE: If necessary, you may attach an addendum to the application listing ad	ditional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the	
	ne application)
14. Alice M. Travis, Chief Executive Officer (Typed or printed name and capacity of person signing	application)

STATE OF GEORGIAN 17 AM II: 58

Secretary of State

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

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

TRAVIS DESIGN ASSOCIATES, P.C.

Domestic Professional Corporation

was formed or was authorized to transact business on 08/08/1996 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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 certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 13th day of November, 2006

Cathy Cox Secretary of State

Certification Number: 391944-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp