

FD0000007354

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

NO COPY

Office Use Only



200081843662

11/27/06--01025--006 \*\*70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 NOV 27 AM 12:34

FILED

## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Holliday Investigative Services, Inc.  
(Name of corporation - must include suffix)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 NOV 27 AM 12:34

FILED

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:

Buddy Jones  
(Name of Person)  
Holliday Investigative Services, Inc  
(Firm/Company)  
1860 Sandy Plains Road #204  
(Address)  
Marietta Ga 30066  
(City/State and Zip code)

For further information concerning this matter, please call:

Buddy Jones at (770) 428-5700  
(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  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for 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 FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Holliday Investigative Services, Inc.

(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)

2. Georgia

(State or country under the law of which it is incorporated)

3. 30-0130155

(FEI number, if applicable)

4. Dec 4, 2002

(Date of incorporation)

5. \_\_\_\_\_

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1860 Sandy Plains Road, #204, Marietta GA 30066

(Principal office address)

(Current mailing address)

8. Private Detective Agency

(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:

LISA Erath

Office Address:

10091 Freesian Way

LAKE WORTH

(City)

, Florida

33467

(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.*

Lisa Erath

(Registered agent's signature)

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.

06 NOV 27 AM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Buddy Jones

Address: 150 Birchwood Pass Canton Ga 30114

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Laurie Holliday

Address: 1341 Canton Road, Marietta Ga 30066

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Buddy Jones

(Signature of Director or Officer listed in number 12 of the application)

14. Buddy B. Jones President/CEO

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

FILED  
06 NOV 27 AM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Control No. 0260431

# STATE OF GEORGIA

## Secretary of State

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

### CERTIFICATE OF EXISTENCE

06 NOV 27 AM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

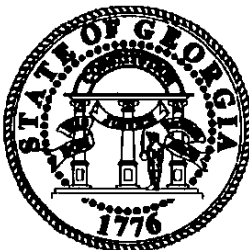
#### HOLLIDAY INVESTIGATIVE SERVICES INC.

##### Domestic Profit Corporation

was formed or was authorized to transact business on 12/04/2002 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 15th day of November, 2006

Cathy Cox  
Secretary of State