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Division of Corporations

Fax Number : (850)205-0381

Account Name : CORPDIRECT AGENTS, INC.

Account Number: 110450000714 Phone : (850)222-1173

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FOREIGN PROFIT/NONPROFIT CORPORATION

CAPITALSOUTH CORPORATION

Certificate of Status	0
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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.

			adopted for the purpose of transacting business in Plorida)
North Care		_3.	54-2068002
•	under the law of which it is incorporated)		(FEI number, if applicable)
August 14		5,	Perpetual 55
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
1011 F M	(Date first transacted busine (SEE SECTIONS 607.1501 & 60 Orehead St., Suite 150	058 i 07,1:	n Florida, if prior to registration) 502, F.S., to determine penalty liability)
	(Principal office	add	ress)
Chariotte	NC 28204	www	
onanone,	(Current mailing	add	tress)
		(P.C	· ·
515 Foot Bork Avenu			
fice Address:	Tallahassee		 32301
	(City)		, Florida 32301 (Zip code)
v ing bee n nan	application, I hereby accept the appo	inti tes i	ice of process for the above stated corporation at the pi ment as registered agent and agree to act in this capaci relative to the proper and complete performance of my osition 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.

To: +1 (850) 205-0381 Subject: From: Patricia Tadlock

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OFFICERS	
ident: Joseph B. Alala, III	
dress: 1011 E. Morehead St., Suite 1	150
Charlotte, NC 28204	,
• •	
e President:	
dross:	
retary:	<u>, </u>
lress:	
ıswer:	
tress:	
TE: If necessary, you may attach an addendum to	o the application listing additional officers and/or directors.
	at Colors
(Signature of Director or Office	er sted in number 12 of the application)
Joseph B. Alala, III, President	•
·	capacity of person signing application)

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NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

CAPITALSOUTH CORPORATION

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 14th day of August, 2002, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Certification# 86346783-1 Reference# 8486314-ACH Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 20th day of February, 2007.

Secretary of State

6 laine I. Marshall

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