

04/24/07

TO FAX

Division of Corporations

F07000002197

001

Page 1 of 1

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000109695 3)))



H0700010969534BC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)205-0381

From:

Account Name : WINDERWEEDLE, HAINES, WARD & WOODMAN, P.A.  
Account Number : 076077002775  
Phone : (407)246-8450  
Fax Number : (407)423-7014

FILED  
07 APR 24 AM 11:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION**

Century Group, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

Handwritten signature/initials

**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. Century Group, Inc.**

*(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")*

Century Group, Inc. of Nevada

*(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)*

**2. Nevada**

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

**3. 20-4825424**

*(FEI number, if applicable)*

**4. April 19, 2006**

*(Date of incorporation)*

**5. perpetual**

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

**6. upon qualification**

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

**7. 100 West Lucerne Circle, Suite 601, Orlando, Florida 32801**

*(Principal office address)*

**100 West Lucerne Circle, Suite 601, Orlando, Florida 32801**

*(Current mailing address)*

**8. any lawful activity**

*(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: Gary D. Lipson

Office Address: 390 N. Orange Avenue, Suite 1500

Orlando, Florida 32801

*(City)*

*(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.*

  
*(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.**

FILED  
07 APR 24 AM 11:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: William A. Mobley, Jr.

Address: 100 West Lucerne Circle, Suite 601, Orlando, Florida 32801

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

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

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

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

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

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

**FILED**  
07 APR 24 AM 11:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. OFFICERS**

President: William A. Mobley, Jr.

Address: 100 West Lucerne Circle, Suite 601, Orlando, Florida 32801

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

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

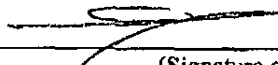
Secretary: \_\_\_\_\_

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

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

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

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

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. William A. Mobley, Jr.  
(Typed or printed name and capacity of person signing application)

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation sales, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CENTURY GROUP, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 19, 2006, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 19, 2007.

ROSS MILLER  
Secretary of State



Electronic Certificate  
Certificate Number: C20070419-1151  
You may verify this electronic certificate  
online at <http://secretaryofstate.biz/>

FILED  
07 APR 24 AM 11:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA