

F07000003511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

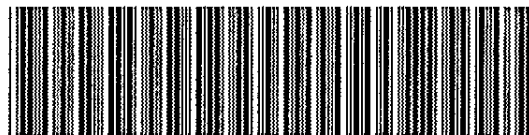
(Business Entity Name)

(Document Number)

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

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 27, 2007

GREGORY T GOLSON  
13550 ISLA VISTA DR  
JACKSONVILLE, FL 32224

SUBJECT: THE GOLSON GROUP INC.  
Ref. Number: W07000030421

We have received your document for THE GOLSON GROUP INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6955.

Suzanne Hawkes  
Document Specialist  
New Filing Section

Letter Number: 107A00042056



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 13, 2007

GREGORY T GOLSON  
13550 ISLA VISTA DR  
JACKSONVILLE, FL 32224

SUBJECT: THE HOMEXPERTS, INC  
Ref. Number: W07000028135

We have received your document for THE HOMEXPERTS, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6955.

Suzanne Hawkes  
Document Specialist  
New Filing Section

Letter Number: 907A00039857

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** THE HOMEXPERTS, 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:

GREGORY T GOLSON  
(Name of Person)  
THE HOMEXPERTS, INC  
(Firm/Company)  
13550 ISLA VISTA DR  
(Address)  
JACKSONVILLE FL 32224  
(City/State and Zip code)

For further information concerning this matter, please call:

GREGORY T GOLSON at (904) 379-9839  
(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

PLEASE  
TRY

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

The Golson Group Inc

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

2. GEORGIA 3. 58-2512541  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JAN 4, 2000 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 13550 ISLA VISTA DR JACKSONVILLE FL 32224  
(Principal office address)

13550 ISLA VISTA DR JACKSONVILLE FL 32224  
(Current mailing address)

8. REAL ESTATE  
(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: GREGORY T GOLSON

Office Address: 13550 ISLA VISTA DR  
JACKSONVILLE, Florida 32224  
(City) (Zip code)

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07 JUN 12 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

[Signature]  
(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.

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

**A. DIRECTORS**

Chairman: GREGORY T GOLSON

Address: 13550 ISLA VISTA DR  
JACKSONVILLE FL 32224

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

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

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

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

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

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

**B. OFFICERS**

President: GREGORY T GOLSON

Address: 13550 ISLA VISTA DR  
JACKSONVILLE FL 32224

Vice President: BARBARA S GOLSON

Address: 13550 ISLA VISTA DR  
JACKSONVILLE FL 32224

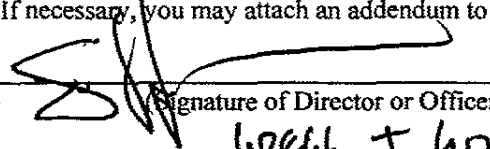
Secretary: BARBARA GOLSON

Address: 13550 ISLA VISTA DR JAX FL 32224

Treasurer: GREGORY T GOLSON

Address: 13550 ISLA VISTA DR JAX FL 32224

**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. GREGORY T GOLSON  
(Typed or printed name and capacity of person signing application)

FILED  
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SECRETARY  
TILMANS

Control No. 0001246

# STATE OF GEORGIA

## Secretary of State

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

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SECRETARY OF STATE  
TALLAMAS

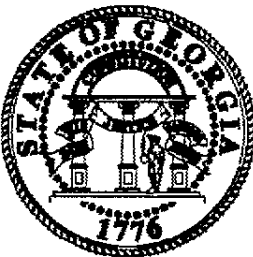
### Certified Copy

I, Karen C Handel, Secretary of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents filed under the name of

### THE HOMEXPERTS, INC.

#### Domestic Profit Corporation

Said entity was formed in the jurisdiction set forth above and has filed in the Office of Secretary of State on the 6th day of January, 2000 its certificate of limited partnership, articles of incorporation, articles of association, articles of organization or application for certificate of authority to transact business in Georgia. This Certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 7th day of June, 2007

Karen C Handel  
Secretary of State