

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0381

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Phone

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FOREIGN PROFIT/NONPROFIT CORPORATION

MOUNTAIN HIGH, INC.

Certificate of Status	0
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Corporate Filing Menu

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under the law of which it is incorporated.

H07000179487 3

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.} Mountair	High, Inc.		
(Enter name of co	orporation; must include "INCORPORATED," "Copp.," "Inc.," "Co,," or "Corp.,")	OMPANY," "CORPORATION,"	-
	igh Leder, Inc.		_
(If name unavails	ble in Florida, enter alternate corporate name adopt	ted for the purpose of transacting business in Florida)	•
₂ North Ca	rolina 3.	51e - 1786 373 (FEI number, if applicable)	
(State or country i	under the law of which it is incorporated)	(FEI number, if applicable)	
4. 04/27/19	92 _{5.} pe	rpetual	_
(Date	of incorporation) (Du	ration: Year corp. will cease to exist or "perpetual")	
6. Upon Qu			_
	(Date first transacted business in Flor (SEE SECTIONS 607.1501 & 607.1502, F		
, 321 Sout	h Polk Street, Pineville, NC	., 28134	
	(Principal office address)		-
321 Sout	h Polk Street, Pineville, NC		_
	(Current mailing address)		•
8. lanfi	of corporation authorized in home state or country		-
, , ,	•		0
9. Name and street	<u>t address</u> of Florida registered agent: (P.O. Bo	x NOT acceptable)	
Name:	CorpDirect Agents, Inc.		
Office Address:	515 East Park Avenue		70 1
	Tallahassee	, Florida 32301 (Zip code)	6 3
	(City)	(Zip code)	50 15 E
Having been nam designated in this further agree to c	application, I hereby accept the appointment	f process for the above stated corporation at the as registered agent and agree to act in this cape we to the proper and complete performance of n n as registered agent.	ačity. I
_	(Registered agent's signature)	cretary	
11. Attached is a	certificate of existence duly authenticated, not	more than 90 days prior to delivery of this applic	cation to

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

H07000179487 3

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman Samuel E. Leder	
Address: 13257 State Koad 7, Sure 209	
Born Ration, 92 38428	
Dweeter c	
Address: 630 River Chase Rage W	
ATTanta GA 30328	
Director: Grange J Bishop, III	
Address: 3906 N. Occan Blud	
mystre Beach, SC 29578	
Oc. Check	
1500 Charles	
010 - 1 - 5	
Mantation, 12 33317	
B. OFFICERS	
President:	
Address:	
Vice President:	
Address:	_
Secretary:	
Addross:	
Treasurer:	
Address:	_
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
(0 5 l k	
13. (Signature of Director or Officer listed in number 12 of the application)	
14. Samuel E. Leder	
(Typed or printed name and capacity of person cigning application)	—



H07000179487 3

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

MOUNTAIN HIGH, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 27th day of April, 1992, 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.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 28th day of June, 2007.

Secretary of State.

H07000179487-3



Certification# 86862448-1 Reference# 8693203- Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification