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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA.

TILED DE 22 PORTO

Florida Secretary of State Registration/Tax Lien Section New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Dear Sir/Madam,

Enclosed is the application for four Foreign Filings in your State with the necessary funds (\$175.00). They are:

AV Home Services, Inc.	\$87.50
America Project Incorporated	\$87.50
ACCELERATED TECHNOLOGIET, INC.	87.50
Total	\$ 175.0 0
	#1/150

You can return the certified document to each company at their business mailing address. If you have any questions about these applications you came contact me at 770-664-9900 office or 404-964-7184 cell.

Sincerely.

Veshay While



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2007

ORLANDO KING 925 B PEACHTREE ST., SUITE 347 ATLANTA, GA 30309

SUBJECT: AMERICA PROJECT, INC.

Ref. Number: W07000059483

We have received your document for AMERICA PROJECT, INC. and your check(s) totaling \$262.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 corrected 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) 245-6995.

Wanda Cunningham Regulatory Specialist II New Filing Section

Letter Number: 907A00069081

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TO: New Filing Section			ARASAN DE
Division of Corporati	ons		15. V.S.V. 55
SUBJECT: />	HERICA PR	入 03 Ec7 、 I	NC. ORIGE
	(Name of corporation	n - must include suffix))
Dear Sir or Madam:			
The englosed "Application by	Foreign Composition for	Luthorization to Transc	est Duninana in Clavida "
The enclosed "Application by "Certificate of Existence," an transact business in Florida.			
Please return all corresponder	nce concerning this matter	to the following:	
	standa K	3709	
	Name of	Person)	
	(Firm/Con	npany)	
9253	Peachers St	. St. 34"	ד
	Peacher St (Addre	ess)	
2+1a	nta, Gr	30309	
	(City/State a	nd Zip code)	
For further information conce	erning this matter, please ca	all:	
0.0		Aug 677	_
(Name of Person)	at (HoH	Ode & Daytime Telepl	
(Name of Ferson)	(Alica C	ode & Daytime Telepi	ione Number)
STREET/COURIE	R ADDRESS:	MAILING A	
New Filing Section Division of Corporat	ione	New Filing S	
Clifton Building	10112	Division of C P.O. Box 632	
2661 Executive Cent	er Circle	Tallahassee,	
Tallahassee, FL 323	01		
Enclosed is a check for the fo	llowing amount:		
\$70.00 Filing Fee \$	78.75 Filing Fee &	\$78.75 Filing Fee &	\$87.50 Filing Fee,
	Certificate of Status	Certified Copy	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.

	MEDICA						
(Enter name of c	orporation; must include 'orp," "Inc," "Co," or "Cor	'INCORPORATEE p.")	D," "COMPANY	," "CORPORAT	TION,"		
		۶. ۹. ۸	Incorf	POR ダイモ	5		
(If name unavaila	able in Florida, enter alter	nate corporate nam	e adopted for the	purpose of transa	acting busines	s in Flor	ida)
2 Care	EORGIA	3	2	0-54	2757	٥	
(State or country	under the law of which it	is incorporated)		(FEI number, if	applicable)		
4. 03/4	5/2002	5	Per	petua!			
	of incorporation)		(Duration: Ye	ar corp. will cea	se to exist or "	perpetus	al")
6.		12/1/07					
· ·	(Date first	transacted business					*********
	(SEE SECTION	S 607.1501 & 607.	1502, F.S., to dete	ermine penalty li	ability)		
7							
		(Principal office ad					
9253) Peachte	(Current mailing ad	AHAA	,6 / 3	-309		
	!	(Current mailing ad	ldress)	•			
,	2 2 .		. [7]				
8. (Purpose(s	Solver Bus	d in home state or	country to be carr	ied out in state o	Florida M	700	
(r urposets	of corporation authorize	d in nome state or	country to be carr	icu out in state o	A R	1 DEC	
9. Name and stree	et address of Florida reg	istered agent: (P	.O. Box <u>NOT</u> a	cceptable)	TAI		
Name:	Orlando	King			RY C	2 u	m
0.00					OF STATE	U	Ö
Office Address:	Miami (C	METT AYE		021	21 BE	12: 2:	
	Miami		, Florida	531	יכ 🚍	22	
	(C	ity)		(Zip code)			
10. Registered a	gent's acceptance:						
	ed as registered agent	and to accept ser	vice of process i	for the above st	ated corpora	ition at	the pla

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.

12. James and bu	siness addresses of officers and/or directors:
A. DIRECTORS	siness addresses of officers and/or directors:
	siness addresses of officers and/or directors:
	(C. C. S. S. S.)
Address.	ONICS .
Vi Ch-i	
Address:	
Director:	
Address:	
*** *** * ****************************	
Director:	
Address:	
B. OFFICERS	
President:	reams King
	253 Peachtree St Ste 347
	A+lama, 6 = 30309
	Kathryn L. Remolds
	9253 Peacher St Ste 347
Address:	
	stians, 6x 3-3-9
	Mathryn L. Rennelds
	925 B Peachter St. Str 347 Atl, 6+ 3-3-9
Treasurer:	Orland King
Address:	9253 Peachtier S. St. 347, Atlanta, GA 30309
NIA CORT 10	
	ary, 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	00
14.	(Typed or printed name and capacity of person signing application)
	$^{\circ}$ $^{\circ}$

Control No. 021222

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF

EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

AMERICA PROJECT, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 03/05/2002 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 1st day of November, 2007

Karen C Handel Secretary of State

Lever C. Handel

Certification Number: 1819827-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp