F08880001220

(Requestor's Name)			
(Address)			
(Address)			
,			
(City/State/Zip/Phone #)			
(Okyotate/Zigir Hone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



200120587962

03/19/08--01030--008 **87.50

SECRETARY OF STATE

FILED

4

COVER LETTER

SECRETARY DE 14 TO: **New Filing Section Division of Corporations** Elizabeth Street, Inc. SUBJECT: (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: Amy L. Wolfe (Name of Person) Elizabeth Street, Inc. (Firm/Company) 4450-C5 Nelson Brogdon Blvd (Address) Sugar Hill, GA 30518 (City/State and Zip code) For further information concerning this matter, please call: Amy L. Wolfe ~ 271-0099 x 310 (Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS: New Filing Section New Filing Section Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: \$70.00 Filing Fee 378.75 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.

1. Elizabeth	<u> </u>			_	
(Enter name of co	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"			
	Street, Inc. Realty			_	
(If name unavaila	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)				
_{2.} Georgia, L	JSA 3.	_{3.} 84-1617764			
(State or country t	under the law of which it is incorporated)	(FEI number, if applicable)		_	
4. 2/26/2003	5.	_{5.} Perpetual			
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")			
6. NA					
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)					
₇ 4450-C5 N	elson Brogdon Blvd, Sugar l	Hill, GA 30518			
(Principal office address)					
4450-C5 Nelson Brogdon Blvd, Sugar Hill, GA 30518					
(Current mailing address)					
8. Real Estat	e Brokerage		ASSE		
(Purpose(s) of corporation authorized in home state or co	ountry to be carried out in state of Florida)	<u> </u>		
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)					
Name:	Lori Dowers		京が	*1	
Office Address:	1701 Cedar Hill PLACE				
	Lake Mary	Florida 32746			
	(City)	, Florida 32746 (Zip code)			
designated in this further agree to co	ent's acceptance: ed as registered agent and to accept servi application, I hereby accept the appoints omply with the provisions of all statutes r with and accept the obligations of my po	nent as registered agent and agree to a elative to the proper and complete perj	ect in this capac	city. I	

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:	F/1.
A. DIRECTORS	TOR MA LED
Chairman: Amy L. Wolfe	Wifer 19
Address: 4045 Little Falls Drive	MISECRE OF STAN
Cumming, GA 30518	E. F. STATE
Vice Chairman: na	
Address:	
	
Director: na	
Address:	
Director: na	
Address:	
B. OFFICERS	
President: Amy L. Wolfe	
Address: 4045 Little Falls Drive	
Cumming, GA 30518	
Vice President: na	
Address:	
Secretary: same	
Address:	
Treasurer:	
Address:	
,	
NOTE: If necessary, you may attach an addendum to the application listing additional	al officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the app	lication
(Signature of Director of Officer listed in number 12 of the app	neanon)

(Typed or printed name and capacity of person signing application)

Control No.

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

ELIZABETH STREET, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 02/26/2003 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 27th day of February. 2008

> Karen C Handel Secretary of State

Faven C. Handel

Certification Number: 2106508-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp