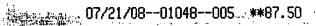
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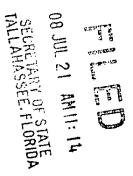
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
opeole, instituctions to rining officer.

Office Use Only



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MRD 7/22

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: CONVENTION CEN	TER LONG DISTANCE, INC. orporation - must include suffix)
(Name of co	orporation - must include suffix)
Dear Sir or Madam:	
	ation for Authorization to Transact Business in Florida," itted to register the above referenced foreign corporation to
Please return all correspondence concerning th	is matter to the following:
FRANK TANDSO	
(Name of Person) A, P.C. Firm/Company)
FRANK TANNER CA	OA PC.
P.D. Box 680 BLACKSHEAR, G	
_	(Address)
BLACKSHUAR, G	A 31516
(Cit	ty/State and Zip code)
For further information concerning this matter,	please call:
FRANK TANNER at (912) 449-4724 × 223 (Area Code & Daytime Telephone Number)
(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 Sectificate of State	

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.

me., 65., 66	rp," "Inc," "Co," or "Corp.")					
(If name unavaila	ble in Florida, enter alternate c	orporate name ad	opted for the p	ourpose of transa	cting business in	n Florida)
2	JEOR 4 F A under the law of which it is inco	3	58	-2115125		
(State or country u	nder the law of which it is inco	orporated)		(FEI number, if	applicable)	_
4	6/3/94 of incorporation)	5.	PE	RPETUAL		
(Date	of incorporation)	(Duration: Yea	ar corp. will ceas	se to exist or "pe	rpetual")
5.						
	(Date first transactions 607			to registration) rmine penalty lia	ıbility)	
7. 285 A				ATLANT	7,64 30.	313-159
285 A				ATLANT.	7,64 30.	<u>3 13-15</u> 9
1. <u>285 A</u> _245 So	NOREW YOUNG INTERPRETATIONS OUT. (Princ) (Current)			ATLANT.	74,64 30.	<u>3 /3- /5 9</u>
_	NOREN GOUNG INTERPRETATION (Princ WTH FORK RO (Curre	ipal office addressent mailing address	BLUD. s) GA 3 s)		74,64 30.	<u>3 /3- 15 9</u>
8. <u>Sale oi</u>		ipal office addressent mailing address	the Bluss. s) GA 3 s) The SORVE	C61		<u>3/3-/5</u> 9
8. SALE O (Purpose(s)	NOREW YOUNG INTERPRETATION (Prince Currently Course) TELEPHONE AND	ipal office addresent mailing addrese	BLUD. SS SGRVZ try to be carrie	cessed out in state of		3/3-159
8. <u>SALE 01</u> (Purpose(s)	(Prince Goung Ing.) (Prince WTH FOKK RO) (Currently FOKK RO) (Curr	ipal office address The Note of the second	BLUD. SS GA 3 SORVE SORVE SOX NOT ac	ces ed out in state of		08 JUL 2
Purpose(s) Name and street Name:	(Prince Goung Ing.) (Prince WTH FOKK RO) (Currently FOKK RO) (Curr	ipal office address The Note of the second	BLUD. SS GA 3 SORVE SORVE SOX NOT ac	ces ed out in state of		08 JUL 2
3. SALE OF (Purpose(s)) O. Name and street	NOREW YOUNG INTERPRETATION (Prince WTH FORK RO) (Current Course of Corporation authorized in home)	ipal office address The Note of the second	BLUD. SS GA 3 SORVE SORVE SOX NOT ac	ces ed out in state of		08 JUL 2
Purpose(s) Name and street Name:	(Prince Goung Ing.) (Prince WTH FOKK RO) (Currently FOKK RO) (Curr	ipal office address The Note	BLUB. SORVE SORVE SORVE SOX NOT ac	cessed out in state of ceptable)	Florida) TALLAHASSEE, F	08 JUL 21 AH 11: 14

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.

A. DIRECTORS
Chairman: WALTER T. WILSON
Address: 479 RISING STAR RO
TYRONG, GA 30290
Vice Chairman:
Address:
Director: ZACNARY B. WILSON
Address: 245 South FORK RD
Tyrune, GA 30290
Director:
Address:
Audress.
D. OFFICEDS
B. OFFICERS
President: WALTER T. WILSON
Address: 479 RISING STAR RO
Tyrans, GA 30290
Vice President:
Address:
Secretary: ZACHARY B. WILSON
Address: 245 SOUTH FORK RD , TYRONE, GA 30290
Treasurer: ZACHALL B. WILCON:
Address: 245 SOUTH FORK RO; TYRONO, GAT 30290
Address. 21) South 10-2 10, 1 period gain 2021
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13: X Mahang B. Welson
(Signature of Director or Officer listed in number 12 of the application) 14. ZACHAR, B. WFLSON, CFO (Typed or printed name and capacity of person signing application)
14. ZACHARY B. WILSON, CFO
(Typed or printed name and capacity of person signing application)

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

Control No. **K414213**

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

CONVENTION CENTER LONG DISTANCE, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 06/03/1994 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 14th day of July, 2008

Karen C Handel Secretary of State

Faun CHandel

Certification Number: 3026914-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp