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(Requestor's Name)				
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(Document Number)				
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COVER LETTER

08 AUG 25 PM 3: 46

	New Filing Section Division of Corporations				
SUBJE	ECT: CDH Partners, Inc.				
	(Name of corporation - must include su	ffix)			
Dear Sir	Sir or Madam:				
"Certific	nclosed "Application by Foreign Corporation for Authorization to Tr ficate of Existence," and check are submitted to register the above re et business in Florida.				
Please re	return all correspondence concerning this matter to the following:				
Jani	ice Null on behalf of Incorp Services, In	C			
	(Name of Person)				
Inco	orp Services, Inc.				
	(Firm/Company)				
375	N. Stephanie St. Suite 1411				
	(Address)				
Hend	nderson, NV 89014-8909	•			
	(City/State and Zip code)				
For furt	rther information concerning this matter, please call:				
Janice	e Null/ Incorp Services, Inc. at (702) 866-2500)			
	(Name of Person) (Area Code & Daytime Telephone Number)				
	New Filing Section New Filin	G ADDRESS:			
	Division of Corporations Clifton Building Division of Corporations P.O. Box 6327				
	2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301				
Enclosed is a check for the following amount:					
\$70. 0	.00 Filing Fee \$\bigcup \\$78.75 Filing Fee & \$\bigcup \\$78.75 Filing Fee Certificate of Status \$\bigcup \\$ Certified Copy	& S87.50 Filing Fee, Certificate of Status & Certified Copy			



SECRETARY OF STATES
DIVISION OF CORPORATIONS

00 AUG 25 PH 3: 46

FLORIDA DEPARTMENT OF STATE Division of Corporations

August 12, 2008

JANICE NULL 375 N. STEPHANIE STREET SUITE 1411 HENDERSON, NY 89014-8909

SUBJECT: CDH PARTNERS, INC. Ref. Number: W08000037883

We have received your document for CDH PARTNERS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6973.

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Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 108A00045706

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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. CDH P	artners, Inc.		
	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	_
	lden, Dorsey & Holmes	Inc.	
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Flori	da)
2. Georgia	3.	<u> 582025595</u>	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
4. 12/28/19	992 5.	Perpetual	
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetua	l")
6. Upon fili	ng by the Secretary of St	ate	
	(Date first transacted business in		
075 T		02, F.S., to determine penalty liability)	
7, 6/5 TOW	<u>er Rd, Marietta, GA 3006</u>		_
	(Principal office addr	,	
<u>675 Tow</u>	<u>er Rd, Marietta, GA 3006</u>	60	
	(Current mailing addr	ress)	©
8. Any lega			AUG 25
(Purpose(s	s) of corporation authorized in home state or co	untry to be carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent: (P.O	. Box NOT acceptable)	
Name:	Incorp Services, Inc.		STATE ONATION STATE
Office Address:	17888 67th Court North		- E
	Loxahatchee	, Florida 33470	
	(City)	(Zip code)	

10. Registered agent's acceptance:

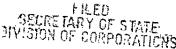
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

on behalf of Incorp Services, Inc.

(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:



•	PIVISION OF CORPORATIONS
A. DIRECTORS	08 AUG 25 PM 3: 46
Chairman: William E. Chegwidden	
Address: 675 Tower Rd.	
Marietta, GA 30060	•
Vice Chairman: Don R. Dorsey	
Address: 675 Tower Rd	
Marietta, GA 30060	
Director: Jeff H. Fincher, Thomas K. Smith, David	P. Strickland, G Edward Wilkins
Address: 675 Tower Rd.	
Marietta, GA 30060	
Director:	
Address:	
B. OFFICERS President: William E. Chegwidden	
Address: 675 Tower Rd	
Marietta, GA 30060	
vice President: Don Dorsey	
Address: 675 Tower Rd	
Marietta, GA 30060	
David P. Strickland	
675 Tower Rd. Marietta, GA 30060	
reasurer: Jeff H. Fincher	
Address: 675 Tower Rd. Marietta, GA 30060	
Mulioss.	
NOTE: If necessary, you may attach an addendum to the application lis	ting additional officers and/or directors.
3. W. Chemb	
(Signature of Director or Officer listed in number	12 of the application)
4. William E. Chegwidden, President	
(Typed or printed name and capacity of person s	signing application)

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

CDH PARTNERS, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 12/28/1992 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 21st day of August, 2008

faun CHandel

Karen C Handel Secretary of State

Certification Number: 3096684-1 Reference:

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