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SECRETARY OF STATE
ALLAHASSEE, FLORIDA



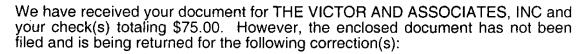
FLORIDA DEPARTMENT OF STATE Division of Corporations

July 25, 2008

VICTOR P. FREEMAN 2480 WINDY HILL RD., SUITE 308 MARIETTA, GA 30067

SUBJECT: THE VICTOR AND ASSOCIATES, INC.

Ref. Number: W08000035213



The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name 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) 245-6995.

Wanda Cunningham Regulatory Specialist II New Filing Section

Letter Number: 108A00043223

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: New Filing Section Division of Corporations	;	u	Internatio	
SUBJECT: THE	VICTOR AND	St include suffix)	TES INC	
	(Name of corporation - mu	st include suffix)	//	
Dear Sir or Madam:			/	
The enclosed "Application by Forest "Certificate of Existence," and check transact business in Florida.				
Please return all correspondence co	ncerning this matter to the	following:		
VICTOR P. F	REEMAN	÷··· • • ·	. 1	
	(Name of Persor	n) Tater N	rational	
THE VICTOR	AND ASSOC	CLATES INC	•	
	(Firm/Company)	7		
2480 WINT	SY HILL ROA	D-SUTTE 3	308	
DATE:	ospanjeji ir (Address) 🧸	.04	:1	
MARIETTA	1 GA 3006	67 · · · · · · · · · · · · · · · · · · ·	errorgome fil	
(City/State and Zip code)				
For further information concerning this matter, please call:				
			>>> > 11	
VICTOR P. TREE (Name of Person)	N/AW (770)2	26-0444	2 2	
(Name of Person)	(Area Code &	: Daytime Telephone Num	E P	
STREET/COURIER ADI New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301		MAILING ADDRESS New Filing Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns	
Enclosed is a check for the following	ig amount:			
	_	fied Copy Cer	50 Filing Fee, rtificate of Status & rtified 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 THE VICTOR AND ASSOCIATED INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") SAME AS ABOUT (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. CEORCAA 3. 20-171-2850 (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 10/15/2004 5. PERPETUML (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) WINDY HILL ROAD -SUITE 308 MARUETTA, GA 30067
(Principal office address) SAME (Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) B. THOMAS HANCHER, P.E.

1493 Feather Dr

CLEARWATER, Florida 33757

(City) (Zip code Name: Office Address: ഗ 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. (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:
A. DIRECTORS
Chairman: VICTOR P. PREEMAN
Address: 1635 MOONLAKE TRAK
KENNESAW, GA 30067
Vice Chairman; N/A
Address:
Director:
Address:
Director: 177 177 177 177 177 177 177 177 177 17
Address:
TOT &
Address: P. OFFICIENS
B. OFFICERS
President: VICTOR P. FREEMAN
Address: 1625 MODINIACE TRAIL
VENNESAW, GA 30067
Vice President:
Address:
Secretary: <u>CATHERINE FREEMAN</u> Address: 1635 MOONLAKE TRAIL; KENNUSAW, GA 30067
Address: 1635 MOONLAICE TRAIL; CENNOSAW, GA 30861
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. VICTOR P. FREEMAN
(Typed or printed name and capacity of person signing application)

Control No.

0460894

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF

TIMES TO AUV.

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

THE VICTOR AND ASSOCIATES INTERNATIONAL, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 10/15/2004 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 26th day of August, 2008

Karen C Handel Secretary of State

Haven C. Handel

Certification Number: 3104410-1 Reference;

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