(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

08 SEP 19 PM 3: 33

TO:	New Filing S Division of C				
SHR	JECT:	Hamle	er Realt	y, Inc.	
БОВ	EC1			- must include suffix	x)
Dear S	Sir or Madam:				
"Certi		nce," and check are subm			sact Business in Florida," enced foreign corporation to
Please	return all corre	espondence concerning th	nis matter to	the following:	
		Leslie	Riley		
			(Name of P	erson)	
		Hamle	er Realt	y, Inc.	
			(Firm/Com	pany)	
		105 C	luail Ru	n Circle	. <u></u>
			(Addres	s)	
		Stock	bridge,	Georgia 3028	1
		(C	ity/State an	d Zip code)	
For fu	rther information	on concerning this matter	, please cal	l:	
	Leslie Rile	y at (404	421-2770	
	(Name of Pe		(Area Co	de & Daytime Telep	phone Number)
	New Filing S Division of C Clifton Build	orporations ing ve Center Circle		MAILING New Filing S Division of G P.O. Box 63 Tallahassee,	Section Corporations 27
Enclos	sed is a check for	or the following amount:			
√]\$70.	.00 Filing Fee	\$78.75 Filing Fee Certificate of Sta		78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status of Certified Copy



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 SEP 19 PH 3:33

FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2008

LESLIE J. RILEY 105 QUAIL RUN CIRCLE STOCKBRIDGE, GA 30281

SUBJECT: HAMLER REALTY, INC. Ref. Number: W08000043218

We have received your document for HAMLER REALTY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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".

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The document must contain both the street address of the principal office and the mailing address of the entity.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 208A00050512

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.

f name unavai	ilable in Florida, enter alternate corporate na	me adopted for t	the purpose of transacting busines	ss in Florida)	
Geo	orgia	3.	27-0048010		
(State or country under the law of which it is incorporated)					
12/20	01	5.	Perpectual Year corp. will cease to exist or		
(Dat	te of incorporation)	(Duration:	Year corp. will cease to exist or	"perpetual")	
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60 105 Quail F	7.1502, F.S., to a			
	(Principal office a		20201		
	Stockbridge (Current mailing)		1 3020 1		
	Real Estat	<u> </u>			
(Purpose(s) of corporation authorized in home state o	r country to be c	arried out in state of Florida)	08 SEP 19	
Name and stre	et address of Florida registered agent: (P.O. Box <u>NO</u> 7	_acceptable)	1.0	
Name:	John Harrison				
fice Address:	213 NE 43rd Street			P# 3	
	Miami	, Flori	da 33137 (Zip code)	မ္မာ မ	
	(City)	,	(Zip code)		

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. Nar	nes, and	business	addresses	of	officers	and/or	directors:
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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

A. DIRECTORS	CORPURATION:
	08 SEP 19 PM 3: 33
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
Address: 105 Quail Run Circle Stockbridge, Georgia 30281	
Address:	
Secretary: Marsena Riley Address: 105 Quail Run Circle Stockbridge, Georgia	a 30281
Address:	
NOTE: If necessary, you may attach an addendum to the application list. (Signature of Director or Officer listed in number Leslie J. Riley	
(Typed or printed name and capacity of person s	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

HAMLER REALTY, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 12/18/2001 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 11th day of September, 2008

> Karen C Handel Secretary of State

faun CHandel

Certification Number: 3131233-1 Reference:

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