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(Requestor's Name)
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Gale Force Inc
(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:
John A Wallace
(Name of Person)
Gale Force Inc
(Firm/Company)
88 Sex 88
(Address)
Meridian Ga 31319
Meri Ji an しょ 31319 (City/State and Zip code)
For further information concerning this matter, please call:
Juhn Wallace # (912) 270 0437
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section
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:
\$70.00 Filing Fee \$\bigcup \$78.75 Filing Fee & \$\bigcup \$78.75 Filing Fee & \$\bigcup \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy



December 2, 2008

JOHN A. WALLACE GALE FORCE INC P.O. BOX 88 MERIDIAN, GA 31319

SUBJECT: GALE FORCE INC. Ref. Number: W08000053725

We have received your document for GALE FORCE 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 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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is V19035 - GALE FORCE INC..

Please return 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) 245-6934.

Loria Poole Regulatory Specialist II

Division of Corporations - P.O. BOY 6327 - Tallahasson, Florida 32314

Letter Number: 008A00058873

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.	Gale Force Inc
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
	me., co., corp, me, co, or corp.)
	Gale Force Foods Truc
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2.	Georgia 3. EIN 58-2178745
	(State or country under the law of which it is incorporated) 3. EIN 58-21787 45 (FEI number, if applicable)
4.	(Date of incorporation) 5. Der Detta (Duration: Year corp. will cease to exist or "perpetual")
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6.	
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7.	1200 Buddy Beckham Rd S.F. Meridian Ga 31319
	1200 Buddy Beckham Rd 5 E. Meridian Ger 71319 (Principal office address)
	POBOX 88 Meridian Ga 3/319 (Current mailing address)
	(Current mailing address)
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9.	Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
	Name: THEODORE K. SEMAN
O	ffice Address: 242 WINDSWEPT CIRCLE NEPTUNE BEACH, Florida 32266
	NEPTUNE BEACH, Florida 32266 (City)
	(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.

(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:
Address:
Vice Chairman:
Address:
Director
Director:
Address:
Director:
Address:
B. OFFICERS
President: John A Wallace
Address: P& Box 88
Meridian Ga 31319
•
Vice President:
Address:
Secretary: Gale Wallace
Address: 20 30x 88 Marilian Ga 31319
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)
(Signature of Director or Officer listed in number 12 of the application)
14 John A Wallace

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

Control No. K501510

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

GALE FORCE, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 12/29/1994 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 28th day of November, 2008

Karen C Handel Secretary of State

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Certification Number: 3267205-1 Reference:

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