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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: SCAD GROUP, INC.			
	f corporat	ion - must include suffix	<u>.)</u>
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp "Certificate of Existence," and check are sultransact business in Florida.			
Please return all correspondence concerning	this matte	er to the following:	
Adrian Jacobs, Esq.			
	(Name	of Person)	
SCAD Group, Inc.			
	(Firm/C	ompany)	
622 Drayton Street			
	(Ad	dress)	
Savannah, Georgia 31401			
(City/State	and Zip code)	
For further information concerning this matt	er, please	call:	
Adrian Jacobs, Esq.	(525-5200	
(Name of Person)	(Area	Code & Daytime Telep	hone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A New Filing S Division of C P.O. Box 63 Tallahassee,	Section Corporations 27
Enclosed is a check for the following amount \$70.00 Filing Fee \$78.75 Filing Fe Certificate of \$	ee& [\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified 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.

1. SCAD Group, 1	nc.	
	corporation; must include "INCORPORATE corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"
(If name unavai	able in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida)
2. Delaware		3. 20-0547324
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
September 17, 2	0003	5 perpetual
``	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. January 1, 2009		
7. 622 Drayton Str		is in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)
	(Principal office a	ddress)
622 Drayton Str	eet, Savannah, GA 31401	
•		
	(Current mailing a	iddress)
Markati	na/	O9
Markati	na/	O9
8. Marketi (Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)
8. Marketi (Purpose(na/	r country to be carried out in state of Florida) P.O. Box NOT acceptable)
8. Marketi (Purpose) 9. Name and stre Name:	s) of corporation authorized in home state or et address of Florida registered agent: (I	r country to be carried out in state of Florida) P.O. Box NOT acceptable)
8. Marketi (Purpose) 9. Name and stre	s) of corporation authorized in home state or et address of Florida registered agent: (I C T Corporation System	country to be carried out in state of Florida)

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.

By: Michael Seraphin Asst. Secretary
(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: ___ Vice Chairman: Address: __ Director: ___ Address: ___ Director: **B. OFFICERS** President: Paula Wallace Address: 622 Drayton St., Savannah, GA 31401 Vice President: (Chief Operating Officer) Brian F. Murphy Address: 622 Drayton St., Savannah, GA 31401 Secretary: Pamela Rhame Address: 342 Bull Street, Savannah, Georgia 31401 Treasurer: Address: NOTE: If negossary, 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. Brian F. Murphy, Chief Operating Officer

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

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCAD GROUP, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF JANUARY, A.D. 2009.

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You may verify this certificate online at corp.delaware.gov/authver.shtml

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 7070317

DATE: 01-08-09