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SEURETARY OF STATE
TALLAHASSEF FLORIDA

EP 3/6/09

W090000009112



February 25, 2009

THOMAS ZANE SUMMERS 1100 WOODRIDGE LANE WATKINSVILLE, GA 30677

SUBJECT: SUMMERS CONSTRUCTION INCORPORATED

Ref. Number: W09000009112

We have received your document for SUMMERS CONSTRUCTION INCORPORATED 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 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.

A photocopy of the registered agent signature is not acceptable.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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) 245-6062.

Letter Number: 309A00006668

Eula Peterson Regulatory Specialist II

Division of Compositions DO DOV 6297 Wallahassaa Florida 2021

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Summers Construction Theorporated (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:			
Induas Zane Summers			
(Name of Person)			
Summers Construction Inc (Firm/Company)			
1100 Woodridge Lane			
(Address)			
Watkinsville, GH 30677			
(City/State and Zip code)			
For further information concerning this matter, please call:			
/			
Karla Summers at (706) 248-7996			
(Name of Person) (Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Cliffon Parilding P.O. Poy 6227			
Division of Corporations Division of Corporations			
2661 Executive Center Circle Tallahassee, FL 32314			
Tallahassee, FL 32301			
Enclosed is a check for the following amount:			
□ \$70.00 Filing Fee □\$78.75 Filing Fee & □ \$78.75 Filing Fee & Certificate of Status Certified Copy 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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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. NRAISERVICES TRIC-(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:	<u> </u>
Address:	
Director:	
Address:	
Director:	
Address:	
	Γ _A ω ο
B. OFFICERS	9 MAR
President: Thomas Summers	DY [7]
Address: 1100 Modriclae Lane	(T) (######
MGHansville, CH 30077	i Os S. A. Grandi
Vice President: Yar la Summers	Dr. D
Address: 1100 Woodridge lave	
Latkinsville GH 30677	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing add	ditional officers and/or directors.
13.	
(Signature of Director or Officer listed in number 12 of the	••
14. Nowas Z. Summers (Typed or printed name and capacity of person signing)	amiliation)

Control No. 0366791

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

O9 MAR -4 PH 3: 20
SEUNCIARY UF STATE
TALLAHASSEE, FLORID

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

SUMMERS CONSTRUCTION INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 12/08/2003 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 25th day of February, 2009

Karen C Handel Secretary of State

Faun CHandel

Certification Number: 3622773-2 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp