# FIBBBBBBBBBBB

(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:					

Office Use Only



400166977954

01/28/10--01026--001 \*\*70.00

ZOOD JAN 28 P 1: 10
SECRETARY OF STATE

1, 3, 10 1, 3, 10

#### **COVER LETTER**



**TO:** New Filing Section Division of Corporations

SUBJECT: Network Services Plus, 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," or "Certificate of Good Standing" 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:

Ivy J Richardson

Name of Person

Name of Person

Network Services Plus, Inc.

Firm/Company

5080 Old Ellis Pointe

Address

Roswell, GA 30076

City/State and Zip code

irichardson@nspi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ivy J Richardson

at (770 ) 752-0900 ext. 5568

Name of Person

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### **MAILING ADDRESS:**

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

-		•	1 1	~	. 1	. 11	. •	
Hnn	0000	10 0	Obook	*^*	tha	tall	ASSTATION OF	amanint.
Dille	USCIL	15 4	CHECK	1171	LIIC	1011	DW III 2	amount:

**☑** \$70.00 Filing Fee

□ \$78.75 Filing Fee & Certificate of Status

□ \$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.	Network Service	s Plus, Inc.			_		
		poration; must include "INCORPORAT"; "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"			
	(If name unavailab	ole in Florida, enter alternate corporate na	ıme	adopted for the purpose of transacting business in Florida)	_		
2.	Georgia		3.	58-1794475			
	(State or country un	nder the law of which it is incorporated)	'	(FEI number, if applicable)	_		
4.	5/2	4/1988	5.	perpetual	_		
	(Ďate o	f incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	_		
6.	·	<u>upon</u> filina	8		_		
				n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
7.	5080 Old Ellis Po	pinte, Roswell, GA 30076		·	_		
	(Principal office address)						
	5080 Old Ellis Po	pinte, Roswell, GA 30076			_		
		(Current mailing	add	ress)			
8.		working at customer sites and a			~~~		
				Annily to be carried out in state of Florida,	11		
9.	Name and street	address of Florida registered agent: (	(P.C	D. Box NOT acceptable)			
	Name:	InCorp Services, Inc.					
o	Office Address:	17888 67th Court North		FLOR	U		
		Loxahatchee		, Florida 33470			
		(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.

Tradic on behalf of Incorp Services, Inc.
(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:	ZOID JAN 28 P
A. DIRECTORS	2011
Chairman: Ted King	JAN 2
Address: 5080 Old Ellis Pointe	ALLAEIAD D
Roswell, GA 30076	ASSEE OF STA
Vice Chairman: Debra King	CORIOA
Address: 5080 Old Ellis Pointe	
Roswell, GA 30076	
Director: Stephen Moss	
Address: 5080 Old Ellis Pointe	
Roswell, GA 30076	
Director:	
Address:	
B. OFFICERS	, , , , , , , , , , , , , , , , , , , ,
President: Ted King	
Address: 5080 Old Ellis Pointe	
Roswell, GA 30076	
Vice President: Stephen Moss	
Address: 5080 Old Ellis Pointe, Roswell, GA 30076	
Address: 3000 Old Ellis i Olitte, Noswell, OA 30070	
Secretary: Debra King	
Address: 5080 Old Ellis Pointe, Roswell, GA 30076	
Treasurer: Debra King	
Address: 5080 Old Ellis Pointe, Roswell, GA 30076	
Address.	
NOTE: If necessary, you may attach an addendum to the application listing additional	al officers and/or directors.
(Signature of Director or Officer listed in number 12 of the app.	lication)
14. Ted D King / President - CEO	
(Typed or printed name and capacity of person signing applic	ation)

Control No. J810095

## 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, Wesley B. Tailor, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

## NETWORK SERVICES PLUS, INC.

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 05/24/1988 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 13th day of January, 2010

Lesley B Sailf

Wesley B. Tailor Deputy Secretary of State

Certification Number: 4786172-1 Reference:

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