F10000000000050

(Requestor's Name)					
(Address)					
(Address)					
(1887-225)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
•					
(Business Entity Name)					
(Document Number)					
(asservative training)					
0.00					
Certified Copies Certificates of Status					
•					
Special Instructions to Filing Officer:					
_					

Office Use Only



000177569740

04/30/10--01022--009 **87.50

SECRETARY OF STATE

10 APR 30 AM 9: 4





COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: CentriNet Corporation	
	corporation - must include suffix
Dear Sir or Madam:	
	oration for Authorization to Transact Business in Florida," Good Standing" and check are submitted to register the sact business in Florida.
Please return all correspondence concerning	this matter to the following:
Sue Adamczyk	
	Name of Person
CentriNet Corporation	
	Firm/Company
1720 Windward Concourse, Ste 310	
	Address
Alpharetta, GA 30005	
	City/State and Zip code
sa@centrinetcorp.com	
E-mail address: (to be used for future annual report notification)
For further information concerning this matt	er, please call:
Sue Adamczyk at	(678) 373-0441
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 Enclosed is a check for the following amoun	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
□ \$70.00 Filing Fee □ \$78.75 Filing F Certificate of S	•

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.	CentriNet Corporation					
		oration; must include "INCORPORATE"," "Inc," "Co," or "Corp.")	ΞD,	" "COMPANY," "CORPORATION,"		
	CentriNet Corp					
	(If name unavailable	e in Florida, enter alternate corporate na	me	adopted for the purpose of transacting busine	ess in Flor	rida)
2.	Georgia		3.	02-0589916		
	(State or country under the law of which it is incorporated)			(FEI number, if applicable)		
4.	3/25/02		5.	perpetual		
		incorporation)		(Duration: Year corp. will cease to exist or	"perpetu	al'')
6.		,				
•				n Florida, if prior to registration)		
		(SEE SECTIONS 607.1501 & 60°	7.1	502, F.S., to determine penalty liability)		
7.	1720 Windward Co	oncourse, Ste 310, Alpharetta, GA 30	000	05		
		(Principal office	add	iress)		
	1720 Windward C	oncourse, Ste 310, Alpharetta, GA 3	00	05	≥ ×	ō
		(Current mailing	adc	lress)	ΣŞ	₽PR
					SA SA	30
8.	systems integrato	r and hosting virtual services			SSEE	
	(Purpose(s) o	f corporation authorized in home state o	or c	ountry to be carried out in state of Florida)	<u>ع</u> رج	K
					35	ق
	9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)					Đ
	Name:	C T Corporation System				
	Office Address:	1200 South Pine Island Road				
		Plantation		, Florida <u>33324</u>		
		(City)		(Zip code)		
	10 70 14					
	10. Registered ag	gent'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.

C T Corporation System — Ternell Kearnev Asst. Secretary

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.



APPROVED

. 12. Names and business addresses of officers and/or directors:

A. DIRECTORS	10 APR 30 AM 9: 40
Chairman:	
Address:	SECRETARY OF STATE:
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Keith Paschall	
Address: 1720 Windward Concourse, Ste 310	
Alpharetta, GA 30005	
Vice President:	
Address:	
Secretary: Keith Paschall	
Address: 1720 Windward Concourse, Ste 310, Alpharetta, GA 300	05
Treasurer: Keith Paschall	
Address: 1720 Windward Concourse, Ste 310, Alpharetta, GA 30	005
NOTE: If necessary, you may attach an addendum to the application listing	g additional officers and/or directors.
(Signature of Director or Officer listed in number 12	of the application)
14 Keith Paschall, President	

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

Control No. 0220463

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, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

CENTRINET CORP.

Domestic Profit Corporation

was formed or was authorized to transact business on 03/25/2002 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 22nd day of April, 2010

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 5835652-1 Reference:

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