

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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#### FOREIGN PROFIT/NONPROFIT CORPORATION

Twelve Baskets Sales and Marketing, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

6/11/2010

### **COVER LETTER**

TO: N	ew Filing Section	1			
	ivision of Carpor				
erio Tec	rr. Twelve Bask	ets Sales and Mar	keting, Inc.		
SUBJEC	1.	Name of co	rporation .	must include suffix	
Dear Sir o	r Madam:				
"Certifica	te of Existence,"	by Foreign Corpor or "Certificate of Corporation to trans	Bood Stand	authorization to Transac ing" and check are subt s in Florida.	et Business in Florida," nitted to register the
Please ret	urn all correspon	dence concerning t	his matter	to the following:	
Elizabeth	H. McMillan				
	<del></del>		Name of F	erson	
Twelve B	askets Sales and	Marketing, Inc.			
			Firm/Comp	oany	
5200 Phil	lip Lee Drive				
			Addre	35	
Altanta, G	SA 30336				
		C	ity/State an	d Zip code	
	,		The read &	or future annual report n	
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For furthe	r information co	ncerning this matte	r, please ce	11:	
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	ivision of Corpor litton Building	ations		Division of Co P.O. Box 6327	
	661 Executive Ce	nter Circle		Tallahassee, F	
	allahassec, FL 3				
Linclosed	is a check for the	following amount	}		
□ \$70.00	Filing Fec 2	1 \$78.75 Filling Fe Certificate of St		\$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 FOREKIN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	Twelve Basket	s Sales and Marketing, Inc.	_			
	(Enter name of c	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	," "COMPANY," "CORPORATION,"		
	(If name unavail	able in Plorida, enter alternate cornorate n	aıne	adopted for the purpose of transacting business in Florid	ia)	
,	Georgia		3		**/	
٠.		under the law of which it is incorporated)	,	(FEI number, if applicable)	_	
4.	09/16/1980		5	Perpetual		
,,	(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual"	<u>")</u>	
6.				•		
				n Florida, if prior to registration)		
	FOOD DEUTE Lan		17.1.	502, F.S., to determine penalty liability)		
7.	5200 Philip Lea	Drive / Altanta, GA 30336 (Principal office	add	rnke)	<del></del>	
	5200 Phillip Lee	e Drive / Altanta, GA 30336	M-4-7			
	OZOO I Milip Cae	(Current mailing	add	iress)	_	
		•				
8.	Any lawful purp			<u> </u>	<b></b> -	
	(Purpose(s	) of corporation authorized in home state of	or ec	ountry to be carried out in state of Florida)	6	
9.	Name and stree	t <u>uddress</u> of Florida registered agent: (	(P.C	D. Box NOT acceptable)	۽ ڪي	acres .
	Name:	Registered Agent Solutions, Inc.				
O	ffice Address:	155 Office Plaza Dr., Suite A				
		Tallahessee		, Florida 32301	MIN 56	
		(City)		(Zip code)	選号	. •
10	. Registered ag	ent's acceptance:		. <b>Q</b>	<b>₩</b>	

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 seent'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.

# 10 JUN 1 H AM 10 58 0 0 1 3 7 7 4 2

# SECRETARY OF STATE 12. Names and business addresses of officers and/or directors: TALLAHASSEE FLORIDA

A. DIRECTORS
Chairpan:
Address:
Vice Chairman:
Address:
Director: William K. McMillan
Address: 3163 Fleming Trail
Mableton, GA 30126
Director: Elizabeth H. McMillan
Address: 1163 Flaming Trail
Mableton, GA 30126
B. OFFICERS
President: Sean McMillan
Address: 5200 Philip Lee Drive
Atlanta, QA 30336
Vice President:
Address:
Secretary: Elizabeth H. McMillan
Address: 1163 Flaming Trail / Mableton, GA 30126
Frensurer: Elizabeth H. McMillan
Address: 1163 Fleming Trail / Mableton, GA 30126
NOTE: It necessary, 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)
4. Elizabeth H. McMillan, Secretary
(Typed or printed name and capacity of person signing application)

Control No. J009602

## 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

### TWELVE BASKETS SALES AND MARKETING, INC.

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 09/16/1980 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 logal 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 10th day of June, 2010

B: P.h.

Brian P. Kemp Secretary of State

Certification Number: 5975093-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/cmp/soskh/verify.asp