Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000243851 3)))



H100002438513ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BROAD AND CASSEL (ORLANDO)

Account Number : 119980000090
Phone : (407)839-4200
Fax Number : (407)839-4264

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

FOREIGN PROFIT/NONPROFIT CORPORATION NuRock Development Group, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

10 NOV -9 AM 9:

Electronic Filing Menu

Corporate Filing Menu

PS-(1)/2/10

11/9/2010



390 NORTH ORANGE AVENUE **SUITE 1400** ORLANDO, FLORIDA 32801 P.O. Box 4961 (32802-4961) TELEPHONE: 407.839.4200 FACSIMILE: 407.425.8377 www.broadandcassel.com

TELECOPIER TRANSMITTAL

DATE:

Wednesday, November 10, 2010 1:38:20 PM

To:

Division of Corporations

ADDRESS:

FL Dept. of State

TELECOPIER PHONE NO.:

18506176381

CONFIRMATION PHONE NO.:

18502456051

FROM:

Michael Cranmer

TOTAL NUMBER OF PAGES:

07 (including cover)

CLIENT AND MATTER:

40707-0012

MESSAGE:

Please see attached re-submission of filing. P. 2 outlines rejection for failure to provide certificate of existence.

A certificate of existence from the State of GA is now attached at the last page of this transmission. Please file the authority to transact business in FL with the initial submission / filing date of 10.9.10.

If necessary I can be reached at 407.481-5254. Thank you for your assistance with this!

PLEASE NOTIFY US IMMEDIATELY IF ALL PAGES WERE NOT RECEIVED AT 407.839.4200

FAX OPERATOR:	FIRST ATTE	MPT:	SECOND ATTEMPT:	
	,			

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS ATTORNEY-CLIENT PRIVILEGED AND CONFIDENTIAL. IT IS INTENDED FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

850-817-8381

11/10/2010 9:52:30 AM PAGE 1/001 Fax Server



November 10, 2010

FLORIDA DEPARTMENT OF STATE
Division of Compositions

BROAD AND CASSEL (ORLANDO)

SUBJECT: NURCCE DEVELOPMENT GROUP, INC. REF: W10000052623

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section FAX Aud. #: H10000243851 Letter Number: 810A00026445

P.O BOX 6327 - Tallehassee, Florida 32314.

COVER LETTER

TO: New Filing Section of Corp					
summer. NuRoc	k Development G	Proup. Inc.			
SUBJECT.		ion - must include suffix			
Dear Sir or Madam:					
"Cortificate of Existence,		for Authorization to Transact Standing" and check are enhan- liness in Florida.			
Please return all correspo	Please return all correspondence concerning this matter to the following:				
Michael Cranme	Michael Cranmer mcranmer@broadandcassel.com				
	Name	of Person			
Broad and Case	sei .				
	Firm/C	Company			
390 N. Orange	390 N. Orange Avenue, Suite 1400				
	A	ddress			
Orlando, FL 3280	01-4961		•		
	City/State and Zip code				
plaine@eastwindd	plaine@eastwinddev.com				
	E-mail address: (to be used for future annual report potification)				
For further information of	onoeming this matter, ples	se call:			
,	. ,,		(M7)		
Wiichael Cranmer	at (-661	407, 481-5254 / Fax 4	425-8377		
Name of Person		rea Code & Daytime Telepho	ne Number		
STREET/COUI New Piling Secti Division of Cosp Clifton Building 2661 Executive (Tallahassee, FL	orations Center Cirole	MAILING AI New Filing Sec Division of Cu P.O. Box 6327 Tallahasson, FI	vion rporations		
Enclosed is a check for the	he following amount:				
570:00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Conv	Certificate of Status & Certificate Copy		

Broad and Cassel

11/10/2010 1:39

PAGE 005/007

Fax Server

FILED

10 NOV -9 AN 9: 24

SECRETARY OF STATE TALLAHASSEE, FLORIGA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

I. NuRock Day	elopment Group, Inc.	<u></u>
(Enter name of o	corporation; must include "INCORPORATED," " Corp." "Inc," "Co.," or "Corp.")	"COMPANY," "CORPORATION,"
(If name unavail	lable in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Florida)
2 Georgia	3. 5	8-2449677
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
4. April 30, 19		erpetual
(Date	of incorporation) (Duration: Year corp. will cause to exist or "perpetual")
6. November l		
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) t, F.S., to determina penalty liability)
7. 3460 Prest	ton Ridge Road, Suite 175, Alph	aretta, GA 30005
	(Principal office address	3)
same as a	bove	
	(Current mailing address	
_{8.} developme	anf	
	s) of corporation authorized in home state or cour	utry to be carried out in state of Florida)
	•	•
y. Name and stre	et address of Plorida registered agent: (P.O.)	Box NOT acceptable)
Name:	John F. Weir - c/o Eastwind Developme	ent .
Office Address:	8380 Resource Drive, Suite 1	
	West Palm Beach	3340 4
	(City)	, Florida 33404 (Zip code)
	(Oily)	(Zap oxio)
Having been nam designated in this further agree to c	s application, I hereby accept the appointme	of process for the above stated corporation at the place at as registered agent and agree to act in this capacity. I alive to the proper and complete performance of my dutie ion as registered agent.
	01 20%	

(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 outlody 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: Robert G. Hoskins				
Address: 3460 Preston Ridge Road, Suite 175				
Alpharetta, GA 30005				
Vice Chairman:	•			
Address:				
Director;				
Address:				
Dimeter	<u>≛</u> 6 8 .			
Director;	<u> </u>			
Address:				
				
B. OFFICERS	<u> </u>			
President; Robert G. Hoskins				
Address: 3460 Preston Ridge Road, Sulte 175				
Alpharetta, GA 30005	•			
Vice President:				
Address:				
Secretary: Robert G. Hoskins	· · · · · · · · · · · · · · · · · · ·			
Address: 3460 Preston Ridge Road, Suite 175, Alpharetta, GA 30005				
Treasurer:				
Address:				
NOTE: If necessary, you may attach an addendum to the application listing additional officers as	d/or directors.			
13				
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.				
14. Robert G. Hoskins, President, Director, CEO, CFO, Secretary				
(Typed or printed name and especity of person signing application)				

FILED NOV -9 AM 9 25

Control No. K613891

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

NUROCK DEVELOPMENT GROUP, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 04/30/1996 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 14th day of October, 2010

B: P.h-

Brian P. Kemp Secretary of State

Certification Number: 6194129-1 Reference: 14823-56 Verify this certificate online at http://corp.soa.stats.ga.us/corp/soakts/verify.nsp