# F11.000004089

(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(D)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
, , <u> </u>						
Special Instructions to Filing Officer:						





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SECRETARY OF STATE
PALLAHASSEE, FLORIDA

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#### **COVER LETTER**

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TO: New Filing Section Division of Corporations					
SUBJECT: Computer Exchange, LTD.					
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:					
Sanford L Fried					
Name of Person					
Computer Exchange, LTD.					
Firm/Company					
3105 Sweetwater Rd, Bldg 100					
Address $\triangleright \omega$					
Lawrenceville, GA 30044					
City/State and Zip code  sfried@compexch.com					
sfried@compexch.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Sanford Fried at ( 770 ) 806-3939					
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					
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 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.

<ol> <li>Computer Exc</li> </ol>	change, LTD.				
	orporation; must include "INCORPORAT	ED,	" "COMPANY," "CORPORATION,"		
"Inè.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")				
int.					
4	, ,		) * <del>-</del> ~		
Comput	er Exchange Company of	<u> </u>	eorgia (11)	in Elevido	
(If name unavaila	ble in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting busin-	ess in riorida)	
2. Georgia		_ 3.	58-1649904		
(State or country i	under the law of which it is incorporated)		(FEI number, if applicable)		
4. 12/10/1985		5.	Perpetual		
(Date	of incorporation)		(Duration: Year corp. will cease to exist o	r "perpetual")	
6. <b>n/a</b>					
			n Florida, if prior to registration)		
* T	(SEE SECTIONS 607.1501 & 60	)7.1	502, F.S., to determine penalty liability)		
7. 3105 Swee	twater Rd, Bldg 100, Lawre	nc	eville, GA 30044		
₹\$.	(Principal office	add	ress)		
3105 Swee	etwater Rd, Bldg 100, Lav	vre	nceville, GA 30044		
*	(Current mailing	ado	ress)		
<ul> <li>Distributor</li> </ul>	of computer printers and p	rir	nter narts	2011 OCT	~
			ountry to be carried out in state of Florida)	SA -	erina yang
(rurpose(s	of corporation authorized in nome state	UL Ç	outing to be carried out in state of Floriday	12 ARY SSE	
9. Name and stree	et address of Florida registered agent:	(P.0	D. Box NOT acceptable)		m
Name:	Rita Berman			AN ID: 43	
Name:	Ma Dellian			Bm 📻	
Office Address:	4229 Bocaire Blvd		·		
	Boca Raton		, Florida 33487		
	(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.

(Registered agent's signature)

<sup>11.</sup> 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: \_\_\_\_ Vice Chairman: Address: \_\_\_\_ Address: **B. OFFICERS** President: Bruce B. Resnick Address: 3296 Whidby Rd **Buford, GA 30518** Vice President: Address: \_\_\_\_\_ Secretary: Sanford L. Fried Address: 5740 Hershinger Close, Duluth, GA 30155 Treasurer: Sanford L. Fried Address: 5740 Hershinger Close, Duluth, GA 30155 NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. 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.

Control No. J518968

## 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

#### COMPUTER EXCHANGE, LTD.

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 12/10/1985 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 26th day of August, 2011

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 7701676-1 Reference:

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