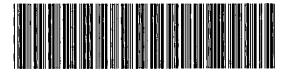
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(Re	equestor's Name)	y				
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PICK-UP	☐ WAIT	MAIL				
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Special Instructions to Filing Officer:						

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T. Bureh MAY, " 2 2012

COVER LETTER

TO:	New Filing Sec Division of Cor				
SUBJ	ECT:	JEFF ERICK	KSON ENTERPRISES, ation - must include suffix	INC	
		Name of corpora	ation - must include suffix		
Dear S	Sir or Madam:				
"Certi	ficate of Existenc	ion by Foreign Corporation e," or "Certificate of Good n corporation to transact but	for Authorization to Transac Standing" and check are subrasiness in Florida.	t Business in Florida," nitted to register the	
Please	return all corresp	ondence concerning this m	atter to the following:		
		JEFF (ERICKENN		
		Name	ERICKSON e of Person		
		Terr Com	SON ENTERPRISES	1.0	
*		VEFF ERICK	SON CNTERPRISES Company	, /NC ,	
			• •		
		2216	COUNTRY CLUB D Address HAVEN, FL 324) <u>R</u>	
		A	Address		
		LYNN	HAVEN, FL 324	44	
		City/Sta	ate and Zip code		
	<.	NITHERNING	EMIND COOKE OF).)	
		E-mail address: (to be us	sed for future annual report no	otification)	
For fu	ther information	concerning this matter, plea	ase call:		
V	HERE RO	TGM Quil at (1	111 1923-1130		
	Name of Person	TEMAN at (1 A	rea Code & Daytime Telepho	ne Number	
STREET/COURIER ADDRESS: MAILING A					
New Filing Section Division of Corporations		New Filing Section Division of Corporations			
Clifton Building			P.O. Box 6327		
	2661 Executive Tallahassee, FL		Tallahassee, FI	. 32314	
Enclos	ed is a check for	the following amount:			
□ \$	70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	887.50 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	STA	TUTES, THE FOLLOWING IS SUBME	<u> T</u> ERS	О
1.	(Enter name of corporation; must include "INCORPORATE	/N	e, <u>e</u> i	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")		변(교(당)	PH 4:	
	(If name unavailable in Florida, enter alternate corporate name			s in Fio	rida)
2.	GEORGIA	3	58-2040420		
	(State or country under the law of which it is incorporated)				
4.	U1 22 1997 (Date of incorporation)	5	PERPETUAL		
	(Date of incorporation)	(Duration: Year corp. will cease to exist or	'perpetu	al")
6.	02/29/12				
			lorida, if prior to registration)		
	·		2, F.S., to determine penalty liability)		
7	1919 DRUMMOND AVE PANAMA (Principal office as	<u> </u>	1TY FL 32405		
	2216 COUNTRY CLUB DR L	۷۸	N HAVEN, FL 32444		
	(Current mailing a	ddre	ss) ,		
8.	VENDING (Purpose(s) of corporation authorized in home state or	00111	stry to be carried out in state of Florida)		
	(i dipose(s) of corporation authorized in nome state of	coui	my to be carried out in state of Fioriday		
9.	Name and <u>street address</u> of Florida registered agent: (P	.0.	Box NOT acceptable)		
	Name: TEFF ERICKSON		_		
Of	fice Address: 1919 DRUMMOND AVE				
	PANAMA CITY		Florida 32405		
	(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)

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: A. DIRECTORS Chairman: JEFF ERICKSON Address: 2216 COUNTRY CLUB DR LYNN HAVEN, FL 32444 Vice Chairman: ___ Address: Director: __ Address: _____ Director: B. OFFICERS President: TEFF ERICKSON Address: 2216 COUNTRY CLUB DR LYNN HAVEN, FL 32444 Vice President: Address: ______ Secretary: ___ Address: ___ Address: 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. JEFF ERICKSON PRESIDENT

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

Control No. K725882

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

12 MAY - 4 PH 4: 15
SECRETARY OF STATE
ALLAHASSEE, FLORID

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

JEFF ERICKSON ENTERPRISES, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 07/22/1997 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 30th day of April, 2012

B:Ph

Brian P. Kemp Secretary of State

Certification Number: 9033941-1 Reference:

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