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, (Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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FILED
12 OCT 12 PH 4: 25
SECRETARY OF STATE
SECRETA

10/15/12

COVER LETTER

TO: New Filing Section Division of Corporations	·
SUBJECT: Star Coin	
	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation 6" (Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	tanding" and check are submitted to register the
Please return all correspondence concerning this man	tter to the following:
Janet K. F	oshee.
Name	of Person
Star Coin	Inc.
Firm/C	ompany
110 Crossway	Rd
Ad	dress
Tallahassee f	L 32305
•	e and Zip code
	d for future annual report notification)
For further information concerning this matter, pleas	e call:
Lynda andrews at (85) Name of Person Arc	ea 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 & Certificate of Status	\$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TOTAL ANSACT
BUSINESS IN FLORIDA FOR S
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 OF THE STATE OF THE STATE OF FLORIDA OF THE STATE OF TH
1 Star Coin Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2 <u>Georgia</u> 3 58-2563043
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1102 1999 5. Perpetual (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual")
6. 11-15-2012
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 110 Crossway Rd Tallahassee FL 32305 (Principal office address)
54 Marshall Rd Milledgeville GA 31061 (Current mailing address)
8. <u>Domestic Profit Corporation - Con Dp Amusement</u> (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Lynda & andrews
Office Address: 110 Crossway Rd
Tallahassee , Florida 32305 (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.

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:	
Address:	
Vice Chairman:	
Address:	
CORE	
Director:	I
Address:	(T)
	
The same of the sa	
Director:	
Address:	
	.
B. OFFICERS	
President: Janet K. Foshee	
Address: 54 Marshall Rd	•
Milledgeville GA 31061	
Vice President:	
Address:	
Secretary: Ronald Foshee	
Address:	
Treasurer: Leigh Brack	
Address: 54 Marshall Rd, Milledgeville GA 31061	
NOTE: If necessary, you may attach an addeptium to the application listing additional officers and/or directors.	
13. * Sanel K + Dill	
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 he are true and that he or she is aware that false information submitted in a document to the Department of State const	
third degree felony as provided for in s.817.155, F.S.	
14. <u>Janet K. Foshee - CEO</u> (Typed or printed name and capacity of person signing application)	

STATE OF GEORGIA

Secretary of State

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

12 OCT 12 PM 4: 29

SECRETARY OF STANF
IALLARASSEE FROM

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

STAR COIN, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 11/02/1999 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 4th day of October, 2012

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 9354570-1 Reference:

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