

F13000002933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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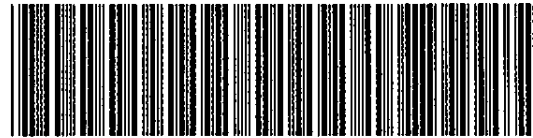
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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14

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Complete Data Source Inc.  
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:

Linda Adamo

Name of Person

Complete Data Source Inc.

Firm/Company

6885 Pea Ridge Road

Address

Gainesville, GA 30506

City/State and Zip code

LADAMO@COMPLETEDATA.SOURCE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda Adamo

Name of Person

at (770) 889-5557 x318

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 & 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 FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Complete Data Source 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. Georgia 3. 36-4547051  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/20/2004 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 6/1/13  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6885 Pea Ridge Road, Gainesville, GA 30508  
(Principal office address)

Same as above  
(Current mailing address)

8. We have presence in Florida + have customers in Fla.  
(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: Erica Stone

Office Address: 1902 Biscayne Circle Dr.

Navarre, Florida 32566  
(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.*

Erica Stone  
(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: Erica Stone

Address: 1902 Biscayne Circle Dr.

Navarre, FL 32566

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Accounting  
Treasurer: Lidia Adamo

Address: 6885 Tea Ridge Road Gainesville, GA 30506

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Erica Stone

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. Erica Stone President

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

**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

DOCKET NUMBER: 130618L019

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DATE INC/AUTH/FILED: 1/25/2004

JURISDICTION: GEORGIA

PRINT DATE: 06/18/2013

FORM NUMBER: 211

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**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

### **CERTIFICATE OF EXISTENCE**

I, Brian P. Kemp, the Secretary of State of the State of Georgia,  
do hereby certify under the seal of my office that

**COMPLETE DATA SOURCE, INC.**  
**A DOMESTIC PROFIT CORPORATION**

Was formed in the jurisdiction stated above or was authorized to  
transact business in Georgia on the above date. 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.



**B. P. Kemp**

Brian P. Kemp  
Secretary of State