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(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
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Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					





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(M) 10/30

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Sunglass Warehouse, 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: Erica Brodnax
Name of Person
Sunglass Warehouse, Inc.
Firm/Company 5155 Shiloh Road Suite 200
Cumming, GA 30040
City/State and Zip code erica@sunglasswh.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Erica Brodnaxat (470) 239-3699
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: \$\Boxed{1}\$ \$70.00 Filing Fee \$\Boxed{1}\$ \$78.75 Filing Fee & \$\Boxed{2}\$ \$78.75 Filing Fee & Certificate of Status & Certified Copy}\$\$\$ \$\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		STATUTES, THE FOLLOWING IS SUBMITT BUSINESS IN THE STATE OF FLORIDA.	ED TO	ಪ
	ss Warehouse, Inc.		35 EN	001
(Enter name of	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	SSEE.	129 PM
Sunglas	ss Warehouse		E.S.	္
(If name unavai		adopted for the purpose of transacting business in	Florida)	0
_{2.} Georgia	3.	58-239-3814	``> >	6
•	under the law of which it is incorporated)	(FEI number, if applicable)		
4. 05/28/19	998 _{s.}	Perpetual		
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "per	rpetual")	
6				
	(Date first transacted business i	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
- 5155 Shi	iloh Road Suite 200, Cu			
7.0100 011	(Principal office add			
5155 Sh	iloh Road Suite 200, Cu	·		
	(Current mailing add			
Retail S	unglass Sales			
~	a) of corporation authorized in home state or co	nuntry to he corried out in state of Florida)		
		-		
9. Name and <u>stree</u>	et address of Florida registered agent: (P.	-		
Name:	Corporate Filing Solutions, L	<u></u>		
Office Address:	155 Office Plaza Drive, Suite	e A		
	Tallahassee	Florida 32301		
	(City)	, Florida 32301 (Zip code)		
Having been nam designated in this further agree to co dutles, and I am fi	application, I hereby accept the appoints omply with the provisions of all statutes is amiliar with and accept the obligations of Orporate filing 5010	HONS, LLC	this capac	city. I
	(Registered agent's si	L, MMygh gnature)		

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:	<u>. </u>		
Address:			
	<u>≯</u>	ಪ	
Director:		OCT	" ;
Address:	\$64 \$124 \$124 \$124 \$124 \$124 \$124 \$124 \$12	29	
	برا مسلم بروین بروین	НЧ	1 1
Director:	TATI PRI	3: O	i.
Address:	2>		
B. OFFICERS President: R. F. Doty, Jr. Address: 5155 Shiloh Road Suite 200 Cumming, GA 30040			
Vice President:			
Address:			
Secretary:			
Address:			
Treasurer: Paul Schrafft			
Address: 5155 Shiloh Road Suite 200, Cumming, GA 30040			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	or director	rs.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Department a third degree felony as provided for in s.817.155, F.S.			
R.F. Doty, Jr., President			

(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. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : K820359
DATE INC/AUTH/FILED : May 28, 1998
JURISDICTION : Georgia

PRINT DATE : 10/16/2013 11:59:52 AM

CERTIFICATE OF EXISTENCE

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

SUNGLASS WAREHOUSE, INC. A Domestic 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.

OF G.E.O. COLUMN OF COLUMN

Brian P. Kemp Secretary of State