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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:
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SECRETARY OF STATE DIVISION OF CORPORATIONS
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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: HALPERN ENTER	PRIS	SES OF GEOR	GIA, INC.	
		- must include suffix	······································	
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporat "Certificate of Existence," or "Certificate of Go above referenced foreign corporation to transact	od Stan	ding" and check are sub		
Please return all correspondence concerning this	s matter	to the following:		
Madina M. Scott, Paralegal				
Na	ame of I	Person		
Cohen Pollock Merlin & Sma	all, P	.C.		
Fir	m/Com	pany		
3350 Riverwood Parkway, S	3uite	1600		
	Addre	SS		
Atlanta, GA 30339				
City	State ar	nd Zip code		
mms@cpmas.com				
E-mail address: (to b	e used f	or future annual report r	otification)	
For further information concerning this matter,	please c	all:		
Madina M. Scott	70	857-4795		
Name of Person		Code & Daytime Telepho	one 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 Some State of State o		\$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.

, HALPERN ENTERPRISES OF GEORGIA, INC.

		me	adopted for the purpose of transacting business in Florida)	
<u> GEORGI</u>		3.	58-1138687	_
•	under the law of which it is incorporated)		(FEI number, if applicable)	
8/31/197		5.	PERPETUAL	_
	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	
UPON Q	UALIFICATION	-		
	(Date first transacted busine	ss ir	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	-
5269 Bufe	ord Highway, Atlanta, GA			
	(Principal office:			_
5269 Bufo	ord Highway, Atlanta, GA		•	
	(Current mailing			7
	(0		,	JAN 27
Consultir	ig and management serv	vic	ces	× 2
(Purpose(s) of corporation authorized in home state o	ı, co	untry to be carried out in state of Florida)	
. Name and stree	at address of Florida registered agent: ((P.C	D. Box NOT acceptable)	PH 12: 12
	NATIONAL CORPORATE RESEARCH, L			<u>~</u>
Name:	455 Off. DI D :			2
ffice Address:	155 Office Plaza Drive)		
	Tallahassee		, Florida 32301	
	(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: Please see attached Addendum Vice Chairman; Address: ____ **B. OFFICERS** President; Please see attached Addendum Address: ___ Vice President: Address: Secretary: 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. 14. Jack N. Halpern, Chairman

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

ADDENDUM TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

A. DIRECTORS

Jack N. Halpern, Chairman

Address: 5269 Buford Highway, Atlanta, GA 30340

Carolyn H. Oppenheimer

Address: 5269 Buford Highway, Atlanta, GA 30340

B. OFFICERS

Jack N. Halpern, Chief Executive Officer

Address: 5269 Buford Highway, Atlanta, GA 30340

William D. Brown, Jr., President

Address: 5269 Buford Highway, Atlanta, GA 30340

Carolyn H. Oppenheimer, Executive Vice President & Secretary

Address: 5269 Buford Highway, Atlanta, GA 30340

Steve A. West, Vice President

Address: 5269 Buford Highway, Atlanta, GA 30340

Glenn S. Caracappa, Vice President

Address: 5269 Buford Highway, Atlanta, GA 30340

C. Alisa Loften, Assistant Secretary & Treasurer

Address: 5269 Buford Highway, Atlanta, GA 30340

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED : August 31, 1972

: J004838 : Georgia

JURISDICTION PRINT DATE

: January 09, 2014

CERTIFICATE OF EXISTENCE

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

HALPERN ENTERPRISES, 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.

Brian P. Kemp Secretary of State

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