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| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ldress) | |
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| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE

COVER LETTER

| | ing Section of Corporations | | | |
|---|---|-----------------|--|--|
| | ackworth Media, In | c | | • |
| SUBJECT: | | | | |
| | Name | e of corporatio | n - must include suffix | |
| Dear Sir or Mada | am: | | | 1 , |
| "Certificate of E | pplication by Foreign (xistence," or "Certifica I foreign corporation to | ite of Good Sta | r Authorization to Transac anding" and check are sub- less in Florida. | et Business in Florida," mitted to register the |
| Please return all CB Hackwort | correspondence concer h | ning this matt | er to the following: | |
| | | Name of | Person | |
| Hackworth Mo | edia, Inc. | | • • • • • | • • • • |
| | <u></u> | Firm/Co | mpany | |
| P.O. Box 201 | 5 | | | |
| | | Add | ress. | w |
| St. Augustine | , Florida 32085 | | | |
| cb@hackwort | hmedia.com | City/State | and Zip code | |
| | E-mail addre | ss: (to be used | for future annual report n | otification) |
| For further inform | mation concerning this | matter, please | call: | |
| CB Hackworth | า | 404 | 245-6598 | |
| Name of | f Person | | Code & Daytime Telepho | ne Number |
| 111. | | | | |
| New Fili Division Clifton E 2661 Exe | r/COURIER ADDRE ng Section of Corporations Building ecutive Center Circle see, FL 32301 | SS: | MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl | tion porations |
| Enclosed is a che | ck for the following an | nount: | | 1 (14 |
| □ \$70.00 Filing | Fee | | 3 \$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

| | corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.") | o," "COMPANY," "CORPORATION," | | |
|---|---|---|-------------|---------------------------|
| | | | | |
| (If name unavail Georgia | able in Florida, enter alternate corporate nam | e adopted for the purpose of transacting business 20-4411097 | s in Flor | rida) |
| State or country 02/01/2006 | under the law of which it is incorporated) | (FEI number, if applicable) Perpetual | | |
| N | e of incorporation) | (Duration: Year corp. will cease to exist or et conducted any business in Florida | | ıal") |
| 24 Cathedral | Place, St. Augustine, Florida, 320 (Principal office ad | | | <u>-</u> |
| P.O. Box 201 | 15, St. Augustine, Florida, 32085 | Micssy | 7 | SIAIC |
| | ` • | ldress) | 14 MAR 31 P | OIVISION SET BOR |
| Media produ (Purpose(s Name and stree | (Current mailing ad | ublishing). country to be carried out in state of Florida) | | DIVISION ST BORPON STIENS |
| Media produ | (Current mailing ad uction and consulting (video and post) of corporation authorized in home state or cet address of Florida registered agent: (P | ublishing). country to be carried out in state of Florida) | 3 - P | DIVISION AS BORPONAMENS |

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 **CB** Hackworth Chairman: 5222 Antelope Lane, Stone Mountain, Georgia, 30087 Address: **B. OFFICERS CB Hackworth** President: 5222 Antelope Lane, Stone Mountain, Georgia, 30087 Address: _ Vice President: **CB Hackworth** Secretary: 5222 Antelope Lane, Stone Mountain, Georgia, 30087 Address: **CB** Hackworth Treasurer: 5222 Antelope Lane, Stone Mountain, Georgia, 30087 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.

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

11 1:

STATE OF GEORGIA

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

J. Car 11 .

CONTROL NUMBER DATE INC/AUTH/FILED: February 01, 2006

JURISDICTION PRINT DATE

: 0613965

: Georgia

: March 26, 2014

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

HACKWORTH MEDIA, 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