F4000003962

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phon	e #)
		<u></u>
PICK-UP	WAIT	MAIL
· (Bu	siness Entity Nar	me)
		,
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
<u> </u>		
Special Instructions to	Filing Officer:	
		!

Office Use Only



100263956561

09/08/14--01042--008 **87.50

14 SEP 18 PH 3: 24

W14-55A29

COVER LETTER

TO: New Filing Section

Division of Corporations

SUBJECT: TheatreSouth Atlanta, Inc.

Name of Corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Herman LeVern Jones

Name of Person

TheatreSouth Atlanta, Inc.

Firm/Company

13952 SW 276 Way

Address

Homestead, Florida 33032

City/State and Zip Code

theatresouthatlanta@yahoo.com

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

For further information concerning this matter, please call:

Herman LeVern Jones

305 、9

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

THEATRESOUTH ATLANTA, INC. 13952 SW 276TH WAY HOMESTEAD, FLORIDA 33032 919-337-5430-OFFICE 919-337-5430-CELL

To: Department of State
Division of Corporations
Clifton Building

From: Herman LeVern Jones

Filer for TheatreSouth Atlanta, Inc.

Re: Certificate of Existence

Please note that the required document were sent in to your office along with the money orders to pay for the registration of THEATRESOUTH ATLANTA, INC. as a foreign company in the State of Florida. I was told that the money orders were cashed and I only needed to send in the enclosed letter for the Georgia Secretary of State <u>CERTIFICATE</u> <u>OF EXISTENCE</u> TO HAVE THE STATUS CHANGED.

Thank you for your prompt attention to this matter.

If there are any questions, please call either telephone number listed above.

Sincerely with kindest regards,

Yours in the Arts,

Herman LeVern Jones

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: March 06, 2008 JURISDICTION PRINT DATE

: 08025633 : Georgia : September 12, 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

THEATRESOUTH ATLANTA, INC. A Domestic Non-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.



Brian P. Kemp Secretary of State

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like

(If name unavailable in Florida, enter alternate c	corporate name adopted for the purpose of transacting b	business in Florida)
Georgia	_{3.} 33-1197536	
(State or country under the law of which it is in	. , , , , , , , , , , , , , , , , , , ,	ole)
May 6, 2008	5. perpetual	
(Date of Incorporation)	(Duration: Year corp. will cease to ex	ist or "perpetual")
NA		
(Date first conducted affairs in Florida if prior to re	egistration. See sections 617.1501 & 617.1502, F.S. to de	etermine penalty liabilit
1681 Niskey Overlook Trail, A	Atlanta, GA 30331	
	(Principal office address)	
13052 SW/ 276th Way Home		
13952 SW 276th Way, Home	•	· · · · · · · · · · · · · · · · · · ·
13932 SVV 27 out VVay, Home	(Current mailing address)	
	(Current mailing address)	eatre arts
Provide entertainment/cultura	(Current mailing address) al events and education using the	eatre arts.
Provide entertainment/cultura	(Current mailing address)	eatre arts.
Provide entertainment/cultura	(Current mailing address) al events and education using the atte or country to be carried out in the state of Florida)	2 2 2
Provide entertainment/cultura (Purpose(s) of corporation authorized in home standard and street address of Florida registere	(Current mailing address) al events and education using the ate or country to be carried out in the state of Florida) ed agent: (P.O. Box NOT acceptable)	eatre arts.
Provide entertainment/cultura (Purpose(s) of corporation authorized in home sta	(Current mailing address) al events and education using the ate or country to be carried out in the state of Florida) ed agent: (P.O. Box NOT acceptable)	SECRE A SECRE A BALLAHAS
Provide entertainment/cultura (Purpose(s) of corporation authorized in home statement and street address of Florida registere Name: Herman LeVern Jor	(Current mailing address) al events and education using the late or country to be carried out in the state of Florida) ed agent: (P.O. Box <u>NOT</u> acceptable)	SECTO AND 8
Provide entertainment/cultura (Purpose(s) of corporation authorized in home standard and street address of Florida registere Name: Herman LeVern Jor	(Current mailing address) al events and education using the late or country to be carried out in the state of Florida) ed agent: (P.O. Box <u>NOT</u> acceptable)	SECRE A SECRE A BALLAHAS
Provide entertainment/cultura (Purpose(s) of corporation authorized in home sta Name and street address of Florida registere Name: Herman LeVern Jor	(Current mailing address) al events and education using the late or country to be carried out in the state of Florida) ed agent: (P.O. Box <u>NOT</u> acceptable)	SECTO AND 8

10. Registered agent's acceptance:

TheatreSouth Atlanta, Inc.

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)

ficate of existence duly authenticated, not more than 90 days prior to delivery of this a

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 addresses of officers and/or directors

A. DIRECTORS		
Chairman: Charles Bythwood		
Address: 100 Board Street, Suite 100		
Atlanta, GA 30301		
Vice Chairman: Iris Fuller		
Address: 4117 Hampstead Village Drive		
Durham, NC 27703		
Director: Herman LeVern Jones		
Address: 1681 Niskey Overlook Trail		
Atlanta, GA 30331		
Director: Dr. Gwendolyn Walker		
Address: 433 Highland Avenue, Unit 1301		
Atlanta, GA 30312		
B. OFFICERS		
President: Yonnick Jones	<u> </u>	
Address: 12935 SW 218th Terrance, Apt. 609		ကို
Miami, FL 33170	(i) (i)	
Vice President: Gwen Walker	Arron Filip	70
Address: Jisela Rodriguez	(C) (A)	မှာ
12935 SW 218th Terrance, Apt. 609, Miami, FI 33107	9 m	<u> </u>
Secretary: Carolyn Jones		
Address: 1681 Niskey Overlook Trail, Atlanta, GA 30331		
Treasurer: Frank Shaw		
Address: 2046 Long Mill Road, P.O. Box 344, Youngsville, NC 27596		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and 13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application of th		tors.
14. Herman LeVern Jones (Typed or printed name and capacity of person signing application)		