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SECRETARY OF STATE

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### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Flatwoods Forest Pr	
Name of corpora	ation - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	
Please return all correspondence concerning this m	atter to the following:
Deren Herring	
Name	e of Person
Flatwoods Forest Products, I	مد،
Firm/	Company
910 Bether Church Road	
A	ddress
Lake Park, be 311e3le City/Sta flatwoodsfp@att.net E-mail address: (to be us	
City/Sta	ate and Zip code
flatwoodsfp@att.net	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Derex Herring at (229	) 563-2023
Name of Person A	rea 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 & \$87.50 Filing Fee, Certified Copy 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. Flatwoods Forest Products, Inc.  (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
Flat woods Forest Products Florida, Tuc.  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Creorgia 3. 27-5314806 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Metch 3, 2011 (Date of incorporation)  5. Pel petcal (Duration: Year corp. will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 910 Bethel Church Road Lake Park, 60. 31636  (Principal office address)  910 Bethel Church Road Lake Park, 6a. 31636  (Current mailing address)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: John L. Butler, Jr.  Office Address: 804 NWCF 141  Jennings, Florida 32053 (Zip code)
9. 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.

10. 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.

(Registered agent's signature)

#### 11. Names and business addresses of officers and/or directors:



A.	DIRECTORS		

Chairman:	14 UCT 27 PM 2: 53
Address:	S-CD
	FLORIDA
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Michael D. Herring	
Address: 910 Bethel Church R	cad
Lake Park, Go. 31630	<u> </u>
Vice President:	
Address:	·
Secretary: Dana Herring	
Address: 910 Bethel Church Rd.	Latre Parle, Gr. 31636
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addend	um to the application listing additional officers and/or directors.
12. Mulal D. Kun	
The officer or director signing this document (an	nd who is listed in number 12 above) affirms that the facts stated herein ormation submitted in a document to the Department of State constitutes
13. Michael D. Herring (Typed or Linted 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 DATE INC/AUTH/FILED: March 03, 2011 JURISDICTION PRINT DATE

: Georgia, 007.2014

: 11017204

#### 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

#### FLATWOODS FOREST PRODUCTS INC A Domestic For-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

B: Ph

Tracking #: B2onyXYc