# F150000000190

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## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Twin Realty, Inc.	
	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact bus	tanding" and check are submitted to register the
Please return all correspondence concerning this ma	tter to the following:
Catherine Lawrence	
Name	of Person
Twin Realty, Inc	
Firm/C	ompany
PO Box 76733	
Ad	dress
Atlanta, GA 30328	
•	e and Zip code
lawrence.cat@comcast.net	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
Cathy Lawrence 31,404	277-3452
Name of Person Are	ea Code & Daytime Telephone Number
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:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
\$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. Twin Rea			
(Enter name of co "Inc.," "Co.," "Co	orporation; must include "INCORPORATED," "CO orp," "Inc," "Co," or "Corp.")	)MPANY," "CORPORATION,"	
Florida Tv	win Realty, Inc.		
(If name unavaila	ble in Florida, enter alternate corporate name adopte	ed for the purpose of transacting busin	ess in Florida)
<sub>2.</sub> Georgia	3.	20-4535788	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable	e)
4. 2/22/2006	5. Pe	rpetual	
(Date	of incorporation) (Dur	ation: Year corp. will cease to exist o	r "perpetual")
<sub>6.</sub> <u>n/a</u>			
	(Date first transacted business in Flori (SEE SECTIONS 607.1501 & 607.1502, F		
<sub>7.</sub> 120 Winds	sor CV, NE, Atlanta, GA 3032	8	
	(Principal office address)		
PO Box 76	733, Atlanta, GA 30358		
-	(Current mailing address)	<i>;</i>	
8. Name and street  Name:	t address of Florida registered agent: (P.O. Box George Mills	x <u>NOT</u> acceptable)	SECRETARIAS
Office Address:	1814 Windermeredowns Place		PH 12: 22  FE FLORIG
	Windermere	, Florida <u>34786</u>	9E 22
	(City)	(Zip code)	Bir
9. Registered age	nt'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)

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Catherine Lawrence Address: 120 Windsor CV, NE Atlanta, GA 30328 Vice Chairman: Catherine Lawrence Address: 120 Windsor CV, NE Atlanta, GA 30328 Catherine Lawrence Address: 120 Windsor CV, NE Atlanta, GA 30328 **B. OFFICERS** President: Catherine Lawrence Address: 120 Windsor CV, NE Atlanta, GA 30328 Vice President: Catherine Lawrence Address: 120 Windsor CV, NE Atlanta, GA 30328 Catherine Lawrence Address: 120 Windsor CV, NE Atlanta, GA 30328 Treasurer: Catherine Lawrence Address: 120 Windsor CV, NE Atlanta, GA 30328 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. 13. Catherine Lawrence, Officer

(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 DATE INC/AUTH/FILED: February 22, 2006

: 0617510

JURISDICTION

: Georgia

PRINT DATE

: January 12, 2015

#### 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

#### TWIN REALTY, 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.

B: 1.h Brian P. Kemp Secretary of State