

F/500000358

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000023352 3)))



H150000233523ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LICENSE EXAM SERVICES
Account Number : 120120000042
Phone : (941)706-2336
Fax Number : (866)473-0571

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: terriehecht@rsmithandassociates.com

**FOREIGN PROFIT/NONPROFIT CORPORATION
RL SMITH AND ASSOCIATES INC**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

RECEIVED

15 JAN 29 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JAN 29 AM 11:39

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

RL 01/30/15

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: RL SMITH AND ASSOCIATES, INC

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

TERRIE HECHT

Name of Person

RL SMITH AND ASSOCIATES, INC

Firm/Company

P.O. Box 312

Address

PHYSICAL

1420 BOB MARINO

MAYSVILLE GA 30558

City/State and Zip code

MAYSVILLE GA 30558

TERRIE HECHT @ RLSMITHANDASSOCIATES.COM

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

For further information concerning this matter, please call:

TERRIE HECHT

Name of Person

at (706) 652-2264

Area 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 & 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.

1. RL SMITH AND ASSOCIATES, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. GEORGIA 3. 58-2620946
(State or country under the law of which it is incorporated) (FET number, if applicable)
4. 04/30/2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1420 BOB MANN ROAD MAYSVILLE GA 30558
(Principal office address)
- PO BOX 312 MAYSVILLE GA 30558
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: LICENSE EXAM SERVICES, LLC

Office Address: 4713 WEBBER ST

SARASOTA, Florida 34232
(City) (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.

Robin O'Connor

(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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JAN 29 AM 11:33

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____
_____**B. OFFICERS**President: ROBERT L SMITHAddress: 1420 BOB MANN ROADMAYSVILLE GA 30558

Vice President: _____

Address: _____
_____Secretary: ROBERT L SMITHAddress: 1420 BOB MANN ROADMAYSVILLE GA 30558

Treasurer: _____

Address: _____
_____**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. [Signature]

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. ROBERT L SMITH, PRESIDENT

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

FILED
15 JAN 29 AM 11:33
SECRETARY OF STATE
DIVISION OF CORPORATIONS

STATE OF GEORGIA

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

CONTROL NUMBER : 0120611
DATE INC/AUTH/FILED : April 30, 2001
JURISDICTION : Georgia
PRINT DATE : January 27, 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

RL SMITH AND ASSOCIATES, INC.
A None 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: P. Kemp

Brian P. Kemp
Secretary of State

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JAN 29 AM 11:33