

### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone

; (850)205-8842

Fax Number

: (850)878-5368

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Email	Address:		

### FOREIGN PROFIT/NONPROFIT CORPORATION Atlanta Auto Color, Inc.

Certificate of Status	0
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Corporate Filing Menu

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DEC - & 2015.

## **COVER LETTER**

то;	ΓO: Registration Section Division of Corporations					
SUBJ	: ECT: ATL	ANTA AUTO CO	LOR, INC.			
5020		N	ame of corporat	on -	must include suffix	,
Dear S	ir or Madam	n:				
"Certif	ficate of Exis		ficate of Good S	tandi	ng" and check are sub	ct Business in Florida," mitted to register the
Please	return all co	rrespondence cor	cerning this ma	ter to	the following:	
<del></del>			Náme	of Pe	rson	
NRAL	Services Inc.					
	<del>, , , , , , , , , , , , , , , , , , , </del>		Firm/C	ompe	ny ·	
1200 S	outh Pine Isla	nd Road				
			Ad	dress		
Plantat	ion, FL 33324	1				
		.1	City/State	and	Zip code	
alovc@	atlantadent.c					
	•	E-mail ad	dress: (to be use	d for	future annual report n	otification)
For fur	ther informa	tion concerning t	his matter, pleas	e cal	<b>!:</b>	
Amanda Love at ( 770		594-6376				
	Name of P	erson	Area C		Daytime Telepl	none Number
	Registration Division of Clifton Bui 2661 Execu	Corporations			MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations
Enclose	•	for the following	g amount:		٠	
\$70	.00 Filing Fe		Filing Fee & cate 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.

I. ATLANTA AU	TO COLOR, INC.			
	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
(If name unavaile	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting busin	ess in Florida)	
2. Georgia	3	27-3428595		
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable	:)	
4	5	Perpetual	,,	
(Date	of incorporation)	(Date of duration, if other than pe	rpetual)	
6. 11-15.	-15	·		
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150			
_ 993 MANSELL I	ROAD, SUITE B, Fulton, ROSWELL, GA, 3007			
7		office address)		
	(Current mailing	address, if different)	<b>三</b>	211
		•	至新	<u>2</u>
8. Name and street	et address of Florida registered agent; (P.O.	Box NOT acceptable)	53	C
Name:	NRAI Services Inc.		ma.	7
Office Address:	1200 South Pine Island Road		18 18 18	<b>≜</b> 8:
	Plantation, FL 33324	, Florida		о О
	(City)	(Zip code)	1>***	-
designated in this further agree to c	ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statates rea	ent as registered agent and agree to a lative to the proper and complete per	ect in this capac	ity. I
aunes, ana 1 am j	amillar with and accept the obligations of a C T Corporation Sys		~	
	•		×	
Ву:	Janifar Vincan	t		
	(Registered ag	ent'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: \_\_ Address: \_ Vice Chairman: Address: \_\_\_ Director: \_\_ Address: \_\_ Address: \_\_\_ B. OFFICERS Vice President: Secretary: Address: \_ Treasurer: 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 11 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) Rou.

Control Number: 10064321

# STATE OF GEORGIA

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

#### 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

### ATLANTA AUTO COLOR, INC.

#### a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below 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.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

: 12229853 : 09/13/2010 : Georgia : 12/4/2015



B: P. Kemp Secretary of State