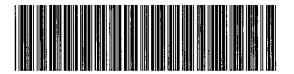
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(Requestor's Name)	
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Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	

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J. HARRIS

# **COVER LETTER**

TO:	Registration of Division of						
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Dear S	ir or Madar	n:					
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Please	return all c	orrespo	ndence concernin	g this matter	to the follow	ing:	
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<b>5</b> \$70	0.00 Filing	Fee	□ \$78.75 Filing Certificate of		J \$78.75 Fili Certified C	_	□ \$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.

^		e adopted for the purpose of transacting business in Florida)
. (State or country	y under the law of which it is incorporated)	6. <u>27~1392313</u> (FEI number, if applicable)
1 1	1008	
(Date	of incorporation) 5.	(Date of duration, if other than perpetual)
321 F	allington Ave A	1502, F.S., to determine penalty liability)  Siehwot Ga 31070  ipal office address)
321 F	allington Ave Princi	Dischurot Ga 31070 ipal office address)
	(Current maili	ipal office address)  ling address, if different)
Name and stree	allington Ave Princi	ipal office address)  ing address, if different)  O. Box NOT acceptable)
Name and stree	(Princi (Current maili	ipal office address)  ing address, if different)  O. Box NOT acceptable)
Name and stree	(Princi (Current mailiest address of Florida registered agent: (P.)  REGISTERED AGENTS INC.	ipal office address)  ing address, if different)  O. Box NOT acceptable)

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.

Bill Havre/Secretary/Registered Agents Inc.

(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: 31070 B. OFFICERS President: William 31070 Vice President: 31020 Secretary: \_ Gene GA 31070 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)

13. William

Control Number: 09081699

## 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

## PROGRESSIVE-SQLUTIONS HOLDINGS LINC

# à 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

: 12584804 : 11/25/2009 : Georgia : 02/03/2016 : 211



Brian P. Kemp Secretary of State