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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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FILED

SECRETARY OF STATE
SECRETARY OF STATE
OF THE CHILD

FEB 2 5 2016 S. YOUNG

COVER LETTER

	stration Sectionsion of Corpora			·
SUBJECT:	TEG Group, I	nc.		
		Name of corporation	- must include suffix	
Dear Sir or M	1adam:			
"Certificate of	of Existence," (Authorization to Transact Business ding" and check are submitted to ress in Florida.	
Please return	all correspond	ence concerning this matter	to the following:	
Brittany Kees	ee			
		Name of F	Person	
TEG Group, I	nc.			
		Firm/Com	oany	70 B
1016 Dundin	Trail			
		Addre	SS	
Woodstock, C	JA 30188			22 2
		City/State ar	nd Zip code	
goodmanjbs@				ος ω
	Ĭ	E-mail address: (to be used for	or future annual report notification	言語の
For further in	nformation con	cerning this matter, please c	all:	र ।
James Goodm	ian	at () 598-5118	
Nan	ne of Person	Area Code	Daytime Telephone Numb	er
Regi Divis Clift 2661	EET/COURI stration Sectionsion of Corpora on Building Executive Cental Section 12	ations nter Círcle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a	check for the	following amount:		
\$70.00 Fi	ling Fee	\$78.75 Filing Fee & Certificate of Status	Certified Copy Certi	0 Filing Fee, ficate of Status &

APPLICATION BY FÓREIGN 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.	ic.			
(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPORATI Corp," "Inc." "Co," or "Corp.")	ED." "CO	OMPANY." "CORPORATION."	
TEG Partners				
(If name unavai	lable in Florida, enter alternate corporate na	me adopt	ed for the purpose of transacting business in Fl	orida)
₂ Georgia		3.		
2. (State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4. 10/23/2002		5.		
(Date of incorporation)			(Date of duration, if other than perpetual)	
6.				
			F.S., to determine penalty liability)	
7		ncipal of	fice address)	<u> </u>
7. 1016 Dunedin T	(Pri	ncipal of		·
	(Pri	ncipal of	fice address) dress, if different)	FEB 24 PI
8. Name and streen Name:	(Pri (Current m eet address of Florida registered agent:	ncipal of	fice address) dress, if different)	FEB 24
8. Name and stre	(Pri (Current m eet address of Florida registered agent: James Goodman 2558 Ballard Rd	ncipal of ailing add	fice address) dress, if different)	FEB 24 PH 3

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.

(Registered agent's signature)

10. Attached it a pertificate 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 James J. Goodman Chairman: 2558 Ballard Ave Address: Orlando, GA 32833 **B. OFFICERS** James J. Goodman President: 2558 Ballard Ave Address: Orlando, GA 32833 Vice President: Brittany Keesee Secretary: 1016 Dunedin Trail, Woodstock GA 30188 Address: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. 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. James J. Goodman

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

Control Number: 0253995

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 scal of my office that

TEG GROUP, 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 Fonn Number



