# FLACCOCAIIA

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# **COVER LETTER**

TO: Registration Section Division of Corporations				
Color Applications, Inc.				•
SUBJECT: Nam	e of corporation	- must include suffix	<del></del>	<del></del>
Dear Sir or Madam:				
The enclosed "Application by Foreign ("Certificate of Existence," or "Certificate above referenced foreign corporation to	ite of Good Stan	ding" and check are subr		)) ''
Please return all correspondence concer	ming this matter	to the following:		
Robert L.Morris				
	Name of l	Person		
Color Applications, Inc.				
	Firm/Com	pany		.,
9898 Highway 92, Suite 240				
Woodstock, GA 30188	Addre	SS	2016 H	71
cai@colorapp.net CC: robert.morris@colo	City/State ar	nd Zip code	HAY - 9	
E-mail addre	ess: (to be used f	or future annual report n	otification),	انتيات
For further information concerning this	matter, please o	all:	100 15 100 15 100 15	
Robert L. Morris	770 at (	591-1110	<b>X</b> > -	
Name of Person	Area Code	e Daytime Teleph	none Number	
STREET/COURIER ADDRI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314		ection rporations	
Enclosed is a check for the following a	mount:			
S70.00 Filing Fee S78.75 Fil Certificat	ing Fee &  © e of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing F Certificate of S	Status &

# 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.

(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	g business in Florida)	
Georgia	3.	58-1881836		
(State or countr February 23, 19	90	(FEI number, if app		
(Date	of incorporation)	(Date of duration, if other	(Date of duration, if other than perpetual)	
Name and street		ng address, if different)	2016 HAY	
Name and stree	et address of Florida registered agent: (P.C Henry A. Morris	). Box NOT acceptable)	WAY -9 A CORETAINY OF S	
Name: ffice Address:	12236 W Restview Court		E. FLOS	
nice Address.	Homosassa	 34448 , Florida	) 15	
	(City)	(Zip code)	· ·	
	ent's acceptance:	ice of process for the above state		

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. DIRE	CTORS	
Chairman:	Henry A. Morris	
Address:	12236 W Restview Court	
_	Homosassa, FL 34448	
– Vice Chair	Robert L. Morris	
Address:	2384 Arlington Pointe Way NW	
_	Kennesaw, GA 30144	
Director: _		
Address: _		
– Director: _		
Address: _		
- B. OFFIC	CERS	
resident:	Henry A. Morris	
Address:	12236 W Restview Court	2016
	Homosassa, FL 34448	
/ice Presid	Robert L. Morris	1550 1550
Address: _	2384 Arlington Pointe Way NW	
	Kennesaw, GA 30144	0.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7
Secretary:	Robert L. Morris	y on
Address: _	2384 Arlington Pointe Way NW, Kennesaw, GA 30144	
reasurer:		
Address: _		
NOTE: 1	f necessary, you may attach an addendum to the application listing a	dditional officers and/or directors.
2	arber I Momi	
ire true an	Signature of Director or Officer r or director signing this document (and who is listed in number 11 d that he or she is aware that false information submitted in a docur tree felony as provided for in s.817.155, F.S.	
13	Vice Chairman	
	(Typed or printed name and capacity of person signing	g application)

Control Number: K003626

### 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

#### COLOR APPLICATIONS, 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

: 13018248 02/23/1990 Georgía : 03/25/2016



Brian P. Kemp Secretary of State