# F17000005325

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
PASIGN WIT-8		
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FILED 17 HOV 27 KM 4:40



November 14, 2017

DONALD PATRICK 172 SHADY LANE FREEPORT, FL 32439

Ref. Number: W17000087047

We have received your document for and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 217A00023015

Octavia L Simmons Regulatory Specialist II

2017 NOY 27 PA E: 33

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Sunford Rose Associates - Norcross, In	c.
	ation - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact b	
Please return all correspondence concerning this n	natter to the following:
Donald R Patrick	
Nam	e of Person
Sanford Rose Associates - Norcross Inc.	
Firm	(Company
172 Shady Lane	
·	Address
Freeport, FL 32439	
City/St	ate and Zip code
drpatrick@sanfordrose.com	ised for future annual report notification)
n-mail address. (to be t	ised for ruture annual report notification)
For further information concerning this matter, plo	rase call:
Donald R Patrick at (770_	v 232-9900
	Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1. 32301	MAILING ADDRESS: Registration 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 & ☐ \$87.50 Filing Fee. Certified Copy 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.

	ssociates - Norcross Inc.	<u></u>	
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp,")	"COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting business	s in Florida)
2. Georgia	3.	58-1909220	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
1. 2/23/2013	5.		
	of incorporation)	(Date of duration, if other than perp	etual)
5. August 2017			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		
7.172 Shady Lane,	Freeport, FL 32439		<u></u>
1 172 Shady Lane,		d office address)	1 1 1
172 Shady Lane,	(Principa	d office address) g address, if different)	17 HOW 27
	(Principa	; address, if different)	17 KDV 27 FH
	(Principa (Current mailing	; address, if different)	
8. Name and stree Name:	(Principa (Current mailing et address of Florida registered agent: (P.O	; address, if different)	17 KOV 27 AH K. W.
8. Name and stree	(Principa (Current mailing et address of Florida registered agent: (P.O Donald R Patrick	; address, if different)	五 · · · · · · · · · · · · · · · · · · ·

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 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.

A. DIRECTORS Chairman: Donald R Patrick Address: 172 Shady Lane, Freeport FL 32439 Vice Chairman: Address: \_\_\_\_\_ Director: Address: **B. OFFICERS** President: Donald R Patrick Address: 172 Shady Lane, Freeport, FL 32439 Vice President: Address: Secretary: Janet L Patrick Address: 172 Shady Lane, Freeport, FL 32439 Treasurer: \_\_\_\_\_\_\_ Address: NOTE: If necessary, you may attach an adjendum 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. 13. Donald R Patrick, Chariman, President

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

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

Control Number: 13395058

### 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

Sanford Rose Associates - Norcross 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 : 14943965 Date Inc/Auth/Filed: 02/22/2013 Jurisdiction : Georgia Print Date : 10/26/2017

Form Number : 211



Brian P. Kemp Secretary of State