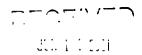
# F21000003917

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
opesial mandatoris to 1 ming officers					

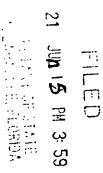
Office Use Only



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06/15/21--01017--020 \*\*87.50





## **COVER LETTER**

	istration Section sion of Corpora	tions				
SUBJECT	JERRY WILS	ON PC				
SCHOLECT	•	Name of corporation	on - m	ust include suffix		
Dear Sir or l	Madam:					
"Certificate	of Existence," o	y Foreign Corporation for "Certificate of Good Stap poration to transact busing	ınding	" and check are subm		
Please returi	all corresponde	nce concerning this matt	er to t	he following:		
Jerry Wilson						
		Name o	f Pers	on	_	
Jerry Wilson	PC					
	•	Firm/Co	mpan	y		
I West Court	square					
		Ado	lress		<u>.                                      </u>	
Decatur, GA	30030					
		City/State	and Z	ip code		
jerrywilson@	thewilsonpe.com					
	E	-mail address: (to be used	for fi	iture annual report no	ification)	
For further i	nformation conc	erning this matter, please	call:			
Jerry Wilson	at ( )					
Nar	ne of Person	Area Co	de	Daytime Telepho	ne Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Sec Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	heck payable to:	ollowing amount: FLORIDA DEPARTMEN \$78.75 Filing Fee & Certificate of Status	□ \$73	STATE 8.75 Filing Fee & entified 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.

	Corp," "Inc," "Co," or "Corp.")				
Jerry Wilson P					
(If name unavai	lable in Florida, enter alternate corporate na	me adopted for the purpose of transac	ting business in Florida)		
Georgia		3. 27-0695767	27-0695767		
(State or country under the law of which it is incorporated)		) (FEI number, if	(FEI number, if applicable)		
8/07/2009		5.			
(Date of incorporation)		5. (Date of duration, if other than perpetual)			
	(SEE SECTIONS 607.1501 & 60	ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liab	oility)		
l West Court Sq	uare, Ste 750 Decatur, GA 30030				
	(Principal	office street address)			
	// rmorpai	<del></del>			
	(Tulopa	<del></del>			
		niling address, if different)			
<u>-</u>					
Name and stre		niling address, if different)			
Name and stre	(Current m	niling address, if different)			
	(Current meet address of Florida registered agent: (	niling address, if different)	72 2		
Name:	(Current met address of Florida registered agent: ( Stephen Cody 16610 SW 82nd Court	niling address, if different) P.O. Box NOT acceptable)	21 J		
Name:	(Current met address of Florida registered agent: ( Stephen Cody 16610 SW 82nd Court	niling address, if different)	21 July 1		
Name: Tice Address:	(Current met address of Florida registered agent: (Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)	niling address, if different) P.O. Box NOT acceptable)	21 JUA 15		
Name: fice Address: Registered ag wing been nam	(Current more than to accept see a seem to the control of the cont	P.O. Box NOT acceptable)  P.O. Box NOT acceptable  , Florida 33157 (Zip code)	21 July 1 led corporation at the la		
Name: Tice Address: Registered ag wing been nam signated in this	et address of Florida registered agent: ( Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)  ent's acceptance: seed as registered agent and to accept see application, I hereby accept the appoint	P.O. Box NOT acceptable)  P.O. Box NOT acceptable)  , Florida 33157 (Zip code)  ervice of process for the above state at the acceptable and agent	ree to act in this capacity		
Name: fice Address:  Registered agoving been nansignated in this ther agree to c	et address of Florida registered agent: ( Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)  ent's acceptance: and as registered agent and to accept so application, I hereby accept the appointments of all statutes	P.O. Box NOT acceptable)  P.O. Box NOT acceptable)  The process of the above state interest as registered agent and ages relative to the proper and compared	ree to act in this capacity		
Name: ffice Address:  Registered agaving been nansignated in this rther agree to c	et address of Florida registered agent: ( Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)  ent's acceptance: seed as registered agent and to accept see application, I hereby accept the appoint	P.O. Box NOT acceptable)  P.O. Box NOT acceptable)  The process of the above state interest as registered agent and ages relative to the proper and compared	ree to act in this capacity		

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 Jerry Wilson Name: \_ Chairman Chairman Name: 167 Gabion Loop, Ellenwood, Ga □ Vice Chairman Address: \_\_ □Vice Chairman Address: □ Director □ Director ☐ President □ President □Vice President ☐ Vice President □Secretary □Treasurer ☐ Secretary ☐ Treasurer □Other \_\_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Jerred B. Wilson Chairman □Chairman Name: Address: 1940 Braeburn Circle SE Atlanta, GA □Vice Chairman □Vice Chairman Address: Director □ Director ☐ President ☐ President □Vice President \_\_\_ ☐ Vice President ■ Secretary □ Treasurer ☐ Secretary ☐ Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other ☐ Other \_\_\_\_\_ Name: Name: \_\_\_\_\_ Chairman □ Chairman □ Vice Chairman Address: □Vice Chairman Address: \_\_\_\_\_ □ Director □ Director ☐ President ☐ President □ Vice President □Vice President ☐ Secretary ☐ Treasurer ☐ Secretary □ Treasurer □Other \_\_\_\_\_ Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Lzus Le 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. Jerry Wilson, CEO

Control Number: 09055980

### 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, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### **JERRY WILSON, P.C.**

a Domestic Professional 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 : 20976905 Date Inc/Auth/Filed: 08/07/2009 Jurisdiction : Georgia Print Date : 06/02/2021

Form Number : 211



Brad Raffensperger

**Brad Raffensperger** Secretary of State

# 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.

tomet name of c	orporation; must include "INCORPORATED.	" "COMPANY," "CORPORATION	ON,"		
"Inc.," "Co.," "C	orp," "Inc," "Co." or "Corp.")				
Jerry Wilson PC	•				
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transact	ting business in Florida)		
Georgia	3	27-0695767			
(State or country under the law of which it is incorporated)		(FEI number, if applicable)			
8/07/2009					
(Date of incorporation)		(Date of duration, if other than perpetual)			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration)	diser		
West Court Son	are, Ste 750 Decatur, GA 30030	502, F.S., to determine penalty had	amy)		
	(rincipal offi	ce street address)			
	(2	ig address, if different)			
	i Current mailin				
	( <del></del>	ig address, if differenty			
Name and stree			21		
	et address of Florida registered agent: (P.C		21 JU		
Name and <u>stree</u> Name:			21 JUA 1		
Name:	et address of Florida registered agent: (P.C		FILE.		
Name:	et address of Florida registered agent: (P.C Stephen Cody	). Box <u>NOT</u> acceptable)	FILED PH 21 JUA 18 PH		
Name:	et address of Florida registered agent: (P.C Stephen Cody 16610 SW 82nd Court		FILED  21 JUN 15 PM 4: 6		
Name: Tice Address:	Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)	D. Box NOT acceptable)   . Florida 33157	FILED  21 JUN 15 PM 4: 00  21 JUN 15 PM 4: 00		
Name: fice Address:  Registered age	Stephen Cody  16610 SW 82nd Court  Palmento Bay  (City)	). Box NOT acceptable)  Florida 33157 (Zip code)			
Name: fice Address:  Registered ago wing been nam signated in this	Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)  ent's acceptance: ed as registered agent and to accept servi application. I hereby accept the appointm	O. Box NOT acceptable)	ed corporation at the pla eree to act in this capacit		
Name: fice Address:  Registered age wing been nam ignated in this ther agree to co	Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)  ent's acceptance: ed as registered agent and to accept servi application. I hereby accept the appointmomply with the provisions of all statutes r	D. Box NOT acceptable)  . Florida 33157 (Zip code)  ce of process for the above statement as registered agent and agelative to the proper and complete.	ed corporation at the pla eree to act in this capacit		
Name: fice Address:  Registered ago wing been nam signated in this ther agree to co	Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)  ent's acceptance: ed as registered agent and to accept servi application. I hereby accept the appointm	D. Box NOT acceptable)  . Florida 33157 (Zip code)  ce of process for the above statement as registered agent and agelative to the proper and complete.	ed corporation at the pla eree to act in this capacit		
Name: fice Address: Registered ago wing been nam signated in this ther agree to co	Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)  ent's acceptance: ed as registered agent and to accept servi application. I hereby accept the appointmomply with the provisions of all statutes r	D. Box NOT acceptable)  . Florida 33157 (Zip code)  ce of process for the above statement as registered agent and agelative to the proper and complete.	ed corporation at the pla eree to act in this capacit		
Name: Tice Address:  Registered age aving been nam signated in this rther agree to co d I am familiar	Stephen Cody  16610 SW 82nd Court  Palmetto Bay  (City)  ent's acceptance: ed as registered agent and to accept servi application. I hereby accept the appointmomply with the provisions of all statutes r	D. Box NOT acceptable)  . Florida 33157 (Zip code)  ce of process for the above statement as registered agent and agelative to the proper and complete.	ed corporation at the pla eree to act in this capacit		

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	Name:	□Chairman	Name:	
□ Vice Chairman	Address: 167 Gabion Loop, Ellenwood, Ga	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	□Secretary		□Treasurer
□Other	□Other	□Other		Other
□Director □President	Name:	☐Director ☐President	Address:	☐Treasurer ☐Other
□ Director □ President □ Vice President □ Secretary □ Other Important Notice: individuals may be	Address:	□ Director □ President □ Vice President □ Secretary □ Other hment will be image of State Annual R	Address:	☐Treasurer ☐Other urposes only. Non-indexed
The officer or direction is aware that fals.817.155, F.S.	ctor signing this document (and who is listed in number alse information submitted in a document to the Departr	11 above) affirms the	nat the facts stated utes a third degree	therein are true and that he or efelony as provided for in

Control Number: 09055980

# STATE OF GEORGIA

# Secretary of State

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

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> Docket Number : 20976905 Date Inc/Auth/Filed: 08/07/2009 Jurisdiction : Georgia : 06/02/2021 Print Date

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Brad Raffensperger

Brad Raffensperger Secretary of State