

# F95000004271

Shannon  
2747 Claremont Cir.  
Jacksonville, FL 32207

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

9/5  
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DIVISION OF CORPORATIONS  
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**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) *WA5-16806*
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-08/21/35--01011--007  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

*Name conflict  
793-66694*

Examiner's Initials

## RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned John Mann, do hereby certify  
that this Resolution of the Board of Directors of Mann Associates, Inc.  
a corporation duly organized and existing under the laws of the State of Virginia,  
was duly adopted on 7/22, 19 94.

Resolved, that Mann Associates, Inc., organized  
and existing in the State of Virginia, hereby adopts the  
name Mann Associates of Virginia, Inc. for use in Florida.

Dated: August 30, 1995

John Mann, ASecy, P.D.  
Signature of at least one director

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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:

1. SHANNON & ASSOCIATES, INC.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. VIRGINIA  
(State or country under the law of which it is incorporated)
3. FED. TAX ID #  
54-172-2627  
(FEI number, if applicable)
4. JULY 22, 1994  
(Date of Incorporation)
5. PERPETUAL  
(Duration: Year corp. will cease to exist or "perpetual")
6. SEPT. 14, 1995 (AMPLIFIED)  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. 2747 CLAREMONT CIR  
JACKSONVILLE, FL. 32201  
(Current mailing address)

8. Consulting and training services  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: JANE SHANNON

Office Address: 2747 CLAREMONT CIR

JACKSONVILLE, FLORIDA, Florida, 32207  
(Zip Code)

10. 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.

Jane C. Shannon  
(Registered agent's signature)

11. 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.

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12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Jane Shannon

Address: 2747 Claremont Cir. Jacksonville, FL 32201

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: JANE SHANNON

Address: 2747 Claremont Cir.

Jacksonville, FL 32201

Vice President: Donna Anderson

Address: 5440 11th St. S.W. Atlanta, GA 30329

1001 E Main St. #110, Richmond, VA 23219

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Donna Anderson  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Donna Anderson  
(Typed or printed name and capacity of person signing application)

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# Commonwealth of Virginia



## State Corporation Commission

I Certify the Following from the Records of the Commission:

SHANNON & ASSOCIATES, INC. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is July 22, 1994.

Nothing more is hereby certified.

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Signed and Sealed at Richmond  
on this Date: August 14, 1995

*William J. Bridge*  
William J. Bridge, Clerk of the Commission