# TO: Qualification Tax Lien Section Division of Corporations TRANSMITTAL LETTER 400001691144

4FIDOD1691144 -0f/f796--0f02--014 \*\*\*\*\*78.75 \*\*\*\*\*78.75

231-18

SUBJECT:	Tuscany Group, Inc.			
	(Name of corporation - must include suffix)		-	
Dear Sir or	r Madam:			
The enclose Florida", "C foreign corp	ed "Application by Foreign Corporation for Authorization to Transact Busin Certificate of Existence", and check are submitted to register the above referoncering to transact business in Florida.	ess in enced		
Please return	rn all correspondence concerning this matter to the following:			
	<u>-</u>			
	Tony Escandari			
	(Name of Person)	92	DV.	
	Tuscany Group, Inc.	7	SECR	
	(Firm/Company)	Z	F AR	
	5315 Cameron Forest PKWY.	96 JAN 17 AHII:	25.4 <b>.</b> 25.4.6.	
	(Address)	=	SIA	
	Alpharetta, GA 30202	19	SKO	
•	(City/State/Zip)			
Should you n	need to call someone concerning this matter, please call:			
<b>ጥ</b>	ony Escandari at ( 404 ) 578-29	99		
	A	(Area Code & Daytime Telephone Number)		

# **COURIER ADDRESS:**

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

# **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

# 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:

(Name of cor abbreviations person or par	Tuscany Group, Inc.  poration: must include the word "INCORPOR of like import in language as will clearly indic thership if not so contained in the name at pre	ATED", "COMPANY", "CORPORATI ate that it is a corporation instead of a nation.)	ON" or words or ntural
2 Ge	eorgia	1 58_2101020	
(State or country	y under the law of which it is incorporated)	3. 58-2191029 (FEI number, if app	ilicable)
4. 08	9-15-1995 e of Incorporation)	s N/A	
(Date	of Incorporation)	(Duration: Year corp. will cease to e)	xist or "nemetual")
6 Up	on Qualification	,	or herberral )
(Date first	oon Qualification transacted business in Florida. (See sections	607.1501, 607.1502, AND 817.155, F.S	5.)
	5315 Cameron Forest PKWY.		
	Alpharetta, GA 30202		
	(Current mailin	g address)	
8. To be	able to build and renovate	homes for our florid	a res. clients.
(Purpose(s) of c Florida)	orporation authorized in home state or country	to be carried out in the state of	
acceptable)	treet address of Florida registered :  Jay Escandari		-
	7123 8th Street South		SECRETARY OF STANISION OF CORPORA
_	St. Petersburg	Florida 33705	FILE F CO
10. Registered	agent's acceptance:	(Zip Code)	T ANII: 19
registered agent all statutes relati and accept the o	ned as registered agent and to accept the place designated in this application and agree to act in this capacity. If tive to the proper and complete perfor bligations of my position as registere (Registered agent's	n, I hereby accept the appointment urther agree to comply with the parties, and I am fail agent.  Signature)	provisions of miliar with
GENACIA OF IN	a certificate of existence duly authenti is application to the Department of Si g custody of corporate records in the	oth hu the Corretors of Cinta on	-4 <b>L</b>

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: Address: Vice Chairman: Address: \_\_\_\_\_ Director: \_\_\_\_\_ Address: Director: \_\_\_\_\_ Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: \_\_\_\_ Tony Escandari Address: \_\_\_\_ 5315 Cameron Forest PRWY. Alpharetta, GA 30202 Vice President: Address: \_\_\_\_\_ Secretary: \_\_\_\_ Cynthia Edwards Address: \_\_\_\_ 5315 Cameron Forest PKWY. Alpharetta, GA 30202 Treasurer: \_\_\_\_\_ Jay Escandari Address: 5315 Cameron Forest PKWY. Alpharetta, GA 30202 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Tony Escandari President

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

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# Decretary of State Ausiness Information and Dervices Quite 315, West Cower 2 Martin Luther King Ir. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 953610264
CONTROL NUMBER : 9524237
DATE INC/AUTH/FILED: 08/15/1995
JURISDICTION : GEORGIA
PRINT DATE : 12/27/1995
FORM NUMBER : 211

TUSCANY GROUP, INC. 5315 CAMERON FORREST PARKWAY ALPHARETTA GA 30202

### CERTIFICATE OF EXISTENCE

I, MAX CLELAND, Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

## TUSCANY GROUP, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above 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.

MAX CLELAND SECRETARY OF STATE SECRETARY OF STATE DIVISION OF CORPORATIONS

CORPORATIONS HOT LINE 404-656-2222 Outside Metro-Atlanta