

Document Number Only

**F96000000459**

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City State Zip Phone

4000001699434  
-01/26/96--01085--021  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

CORPORATION(S) NAME

*Hill Mood Bay Corporation*

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|---|---|---|
| <input checked="" type="checkbox"/> Profit            | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> NonProfit                    | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input checked="" type="checkbox"/> Limited Liability | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Foreign                      | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of R.A.     |
| <input type="checkbox"/> Limited Partnership          | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fic. Name          |
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CR2E031 (1-89)

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION  
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. HALF MOON BAY CORPORATION**

(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. Georgia**

(State or country under the law of which it is incorporated)

**3. 58-1904265**

(FEI number, if applicable)

**4. September 26, 1989**

(Date of incorporation)

**5. Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6. Upon Qualification**

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))

**7. 3111 Paces Mill Road, Suite A-200, Atlanta, Georgia 30339**

(Current mailing address)

**8. To purchase or otherwise acquire, own, hold, lease, trade and sell, or otherwise  
dispose of and deal in real property**

(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:**

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine  
Island Road

Plantation, Florida, 33324

(Zip Code)

**10. Registered agent 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 obligation of my position as registered agent.*

C T Corporation System

(Registered agent's signature) (Officer)

Jennifer F. Aultman, Assistant Secretary

(Type Name and Title of Officer)

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**JENNIFER F AULTMAN**  
ASSISTANT SECRETARY

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.

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

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

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

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

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

Director: Peter D. Anzo

Address: 3111 Paces Mill Road, Suite A-200  
Atlanta, Georgia 30339

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

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

**B. OFFICERS**

President: See attached list of officers

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

Vice President: \_\_\_\_\_

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

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

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

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

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

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

13. \_\_\_\_\_

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

14. Martin H. Peterson, Vice President

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

*Martin H. Peterson*

*L. C. Ross*

*10/21/97*

Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Officers of  
HALF MOON BAY CORPORATION**

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1. Peter D. Anzo, President  
3111 Paces Mill Road, Suite A-200  
Atlanta, Georgia 30339
2. Delisa McEntire, Secretary  
3111 Paces Mill Road, Suite A-200  
Atlanta, Georgia 30339
3. Stephanie Reed, Assistant Secretary/Treasurer  
3111 Paces Mill Road, Suite A-200  
Atlanta, Georgia 30339
4. Martin H. Peterson, Vice President  
3111 Paces Mill Road, Suite A-200  
Atlanta, Georgia 30339

**Secretary of State**  
**Business Information and Services**  
**Suite 315, West Tower**  
**2 Martin Luther King Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

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JURISDICTION : GEORGIA  
PRINT DATE : 01/24/1996  
FORM NUMBER : 0211

CT CORPORATION SYSTEM  
SHARON SERCER  
1201 PEACHTREE STREET, NE  
ATLANTA, GA 30361

**CERTIFICATE OF EXISTENCE**

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

**HALF MOON BAY CORPORATION**  
**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.



*Lewis A. Massey*  
LEWIS A. MASSEY  
SECRETARY OF STATE

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