

F96000000624

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: INNOVATIVE DESIGN IDEAS, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

BRINCE H. MANNING, III
(Name of Person)

MANNING & LEIPOLD, ATTORNEYS AT LAW
(Firm/Company)

127 EAST PONCE DELEON AVENUE
(Address)

DECATUR, GEORGIA 30030
(City/State/Zip)

600001696556
-01/24/96--01039--010
*****78.75 *****78.75

W96-1953

Should you need to call someone concerning this matter, please call:

BRINCE H. MANNING, III at (404) 378-2500
(Name of Person) (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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96FEB-7 AM10:05



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

January 25, 1996

BRINCE H. MANNING, III
MANNING & LEIPOLD, ATTORNEYS AT LAW
127 E PONCE DELEON AVE
DECATUR, GA 30030

SUBJECT: INNOVATIVE DESIGN IDEAS, INC.
Ref. Number: W9600001953

We have received your document for INNOVATIVE DESIGN IDEAS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6094.

Doug Dickinson
Document Specialist

Letter Number: 196A00003338

**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. INNOVATIVE DESIGN IDEAS, 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. GEORGIA

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

3. 59-322-4021

(FEI number, if applicable)

4. 10 AUGUST, 1994

(Date of Incorporation)

5. PERPETUAL

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

6. JANUARY 22, 1996

(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. 442 West Van Buren Street, Hyman Myers Industrial Park, Tallahassee, FLA.
32301

(Current mailing address)

8. Selling and buying furniture, Commercial and Residential and buying and selling Real Estate, selling property related to installation and refurbishing and renovation of
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of real property. Florida)

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

Name: MS. PATTY M. JERVEY

Office Address: 442 West Van Buren St-Hyman Myers Industrial Park

Tallahassee

, Florida, 32301

(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.

x Patty M. Jervy
(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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 FEB -7 AM 10:05

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: LISA TURNER LEVISON

Address: 4990 LAKE FORREST DRIVE - ATLANTA, GEORGIA 30342

Vice Chairman: _____

Address: _____

Director: LISA TURNER LEVISON

Address: 4990 LAKE FORREST DRIVE - ATLANTA, GEORGIA 30342

Director: _____

Address: _____

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

President: LISA TURNER LEVISON

Address: 4990 LAKE FORREST DRIVE - ATLANTA, GEORGIA 30342

Vice President: _____

Address: _____

Secretary: MURICE A. GRANGER

Address: 127 EAST PONCE DELEON AVENUE, DECATUR, GEORGIA 30030

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. LISA TURNER LEVISON - PRESIDENT

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

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

DOCKET NUMBER : 960120070
CONTROL NUMBER : 9420374
DATE INC/AUTH/FILED: 08/10/1994
JURISDICTION : GEORGIA
PRINT DATE : 01/12/1996
FORM NUMBER : 211

BRINCE MANNING
127 E. PONCE DE LEON AVENUE
DECATUR GA 30030

CERTIFICATE OF EXISTENCE

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

INNOVATIVE DESIGN IDEAS, 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.



Lewis A. Massey
LEWIS A. MASSEY
SECRETARY OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 FEB -7 AM 10:06