

SUBJECT: The Humanities Foundation, Inc.
(Name of Corporation)

Dear Sir or Madam:

Division of Corporations

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Gregory W. Brooks

(Name of Person)

Byrne, Eldridge, Moore & Davis, P.C.

(Firm/Company)

3340 Peachtree Road, N.E., Suite 1460

(Address)

Atlanta, Georgia 30326

(City, State and Zip Code)

For further information concerning this matter, please call:

Gregory W. Brooks

at (404) 364 1460

(Name of Person)

Area Code & Daytime Telephone Number

COURIER ADDRESS:

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

MAILING ADDRESS:

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

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Name of	lumanities Foundatio corporation: must include the one of like import in language nathership if not so contains	THORSE TO COMPANY	ED" or "CORPOR	CATION" or wor	ds or	
	ons of like import in language partnership if not so contained suffix by a nonprofit corporati		 that it is a corpora "Company" or "C 	ation instead of a co." may not be u	natural sed as a	
2. Georg	iia		3. 57-0952	289		
(State or it is income	country under the law of which	h		ber, if applicable	2)	
4 1/27,	/92		5. perpetua	1		
(Date of	ncorporation)		(Duration: Year co "perpetual")	orp, will cease to	exist of	
5Upon_	authorization					
(De See	te corporation first conducted sections 617,1501, 617,1502,	Affairs in Florida - and 817.155, F.S.)				
7. <u> </u>	41-B Johnnie Dodds I	Blvd.				
1	it. Pleasant, SCn 29	9464				
	(Curr	nt mailing accress)		•		
	nefit charitable. experience in a corporation sufficient in a corporation sufficient in a corporation of the			ious and so the state of Florid	cientific (a) organi purpos	zations a
	nd street address of Flo	rida registered a		ious and so the state of Florid	eientific purpos	zations a
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. Name a	Lawrence T. Ra 100 S. Ashley Tampa	ndolph (Name) Drive, Suite 2 (Office address (City)	gent: 200		purpos 95 	SECRETARY OF STATE DIVISION OF CORPORATIONS
O. Registaving bee	Lawrence T. Ra	ndolph (Name) Drive, Suite 2 (Office address (City) e: gent and to accept in this application this capacity. If and complete periods	gent: 200 Florida 336 (Zip Code) Service of proces, I hereby accessive the agree to community and accessive the agree to community and accessive the agree of my	ess for the about the appoint	purpos 96 FEB 19 AM 11: 56	SECRETARY OF STATE OVISION OF CORPORATIONS
O. Registaving bee	Lawrence T. Ra 100 S. Ashley Tampa Tampa rered agent's acceptance in named as registered as at the place designated agent and agree to act in es relative to the proper	ndolph (Name) Drive, Suite 2 (Office address (City) e: gent and to accept in this application this capacity. If and complete periods	gent: 200 Florida 336 (Zip Code) Service of proces, I hereby accessive the agree to community and accessive the agree to community and accessive the agree of my	ess for the about the appoint	purpos 96 FEB 19 AM 11: 56	SECRETARY OF STATE OVISION OF CORPORATIONS

- 11. Attached is a certificate of existence duly suthenticated, 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: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT accept	tab	le
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Chairman:	
Address:	
ABBITOTO.	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B.OFFICERS (Street address only- P. O. Box NOT acceptable)	
President: Tracy T. Doran	
Address:741-B Johnnie Dodds Blvd.	
Mt. Pleasant, SC 29464	
Vice President; None	
Address:	
	
Secretary: Mary Ellen Sullivan	
Address: 741-B Johnnie Dodds Blvd.	
Tressurer: Mt. Pleasant, SC 29464	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional of	Eass
and/or directors.	10613
13. Jua J. Dun	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
Tracy T. Doran - President (Typed or printed name and capacity of person signing application)	

12.A. Names/Addresses of Directors

Robert J. Doran, Jr. 741-B Johnnie Dodds Blvd. Mt. Pleasant, SC 29464

Tracy T. Doran 741-B Johnnie Dodds Blvd, Mt. Pleasant, SC 29464

Shane J. Doran 741-B Johnnie Dodds Blvd, Mt. Pleasant, SC 29464

Kay D. Clamp 741-B Johnnie Dodds Blvd. Mt. Pleasant, SC 29464

Mary Ellen Sullivan 741-B Johnnie Dodds Blvd. Mt. Pleasant, SC 29464

John H. Disher 741-B Johnnie Dodds Blvd. Mt. Pleasant, SC 29464

Robert Flowers 741-B Johnnie Dodds Blvd. Mt. Pleasant, SC 29464

Frank Haygood 741-B Johnnie Dodds Blvd. Mt. Pleasant, SC 29464

W. Dale Smith 741-B Johnnie Dodds Blvd. Mt. Pleasant, SC 29464

Secretary of State Business Information and Services Suite 315, West Cower 2 Martin Buther King Ir. Ar. Atlanta, Georgia 30334-1530

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GREG W BROOKS
3340 PEACHTREE RD SUITE 1460
ATLANTA GA 30326

CERTIFICATE OF EXISTENCE

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

THE HUMANITIE: FOUNDATION, INC. A DOMESTIC NONPROFIT 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
SECRETARY OF STATE

