F9600000022294

Qualification/Tax Lien Section

Division of Corporations

TO:

SUBJECT: CROWN FINANCIAL, 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:
ERNEST CLARK, CPA
(Name of Person)
JACKSON THORNTON & CO., P.C.
(Firm/Company)
P.O. BOX 6965
(Address)
DOTHAN, AL 36302
(City/State/Zip)
8 × ×
Should you need to call someone concerning this matter, please call:
ERNEST_CLARK at (334) 793-7001 vo Sign
(Name of Person) (Area Code & Daytime Telephone Number)
7 086

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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 21, 1996

ERNEST CLARK, CPA JACKSON THORNTON & CO., P.C. P.O. BOX 6965 DOTHAN, AL 36302

SUBJECT: CROWN FINANCIAL, INC.

Ref. Number: W96000006116

We have received your document for CROWN FINANCIAL, INC. and your check(s) totaling \$2800.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution: must be signed by the chairman, vice chairman, or an licer of the corporation. The alternate name must contain a corporate suffice of the corporation. Corp., Incorporated, Inc., Company, and

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 487-6958.

Lee Rivers Document Examiner

Letter Number: 696A00013027

Crown Financial, Inc.



May 6, 1996

Mr. Lee Rivers
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Mr. Rivers,

Enclosed please find the corporate resolution for Crown Financial, Inc. adopting the name Crown Financial of Alabama, Inc. for use in Florida. Also enclosed is a copy of your letter of March 21, 1996 regarding same. I am submitting this per our phone conversation of last week.

Thank you for your help in getting us off on the right foot. Please advise me if anything else is needed.

Sincerely,

Dwan Ramsey crown2

RESOLUTION OF BOARD OF DIRECTORS

1, the undersignedBrynn Applefield, do hereby certify		
that this Resolution of the Board of Directors of Crown Financial, Inc. ,		
a corporation duly organized and existing under the laws of the State of Alabama,		
was duly adopted on May 3, 1996.		
Resolved, thatCrown Financial, Inc, organized and existing in the State ofAlabama, hereby adopts the nameCrown Financial of Alabama, Inc for use in Florida.	95 HAY -8 AH 9: 27	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS
Dated:		S)
Signature of at least one director	2	

Bryan Applefield President and Director

APPLICATION BY FGREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

4

IN COMPLIANCE WITH SECTION 607.1503, FLOFIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. (Name of come	CROWN FINANC	CIAL, INC.		
abbreviations of person or partne	like import in language as will clearly indiceship if not so contained in the name at pre-	ATED*, "COMPANY", "CORPORATION" (sate that it is a corporation instead of a natural sent.)	or word	s or
2. ALABAMA	nder the law of which it is incorporated)	3. <u>63-1150739</u>		
(State or country u	nder the law of which it is incorporated)	(FEI number, if applicab	ic)	
4. 7-27-95	(Incorporation)	5. PERPETUAL (Duration: Year corp. will cease to exist of	7	
	QUALIFICATION	(Diffation, Teat corp. will cease to exist of	betbe	ituar)
(Date first tr	ansacted business in Florida. (SEE SECTION:	8 607.1501, 607.1502, AND 817.155, F.S.)	S MAY	SECA
7. 1133 WES	r main street			SEAT.
DOTHAN,	ALABAMA 36301		AH	LEO SY OF S CORPO
	(Current mailir	ng address)	- 5	AA
8. TO TRANS.	ACT ALL LAWFUL BUSINESS FOR I	WHICH CORPORATIONS MAY BE INCO	-1	STED.
(Purpose(s) of cor Florida)	poration authorized in home state or countr	y to be carried out in the state of		
9. Name and straceptable)	reet address of Florida registered	agent: (P.O. Box or Mail Drop Box	: NOT	2
Name:	BRYAN APPLEFIELD	·		
Office Address: _	8701 N. LAGOON DRIVE	····		
	PANAMA CITY BEACH	Florida 32407		
10. Registered a	gent's acceptance:	, Florida , 32407 (Zip Code)		
all statutes relativ	ed as registered agent and to acce e place designated in this application and agree to act in this capacity. I be to the proper and complete perfa ligations of my position as register	pt service of process for the above sto on, I hereby accept the appointment of further agree to comply with the pro ormance of my duties, and I am famil ed agen:	sted as vision iar wi	s of th
	V Below Will	lo cil		

sgent's signature)

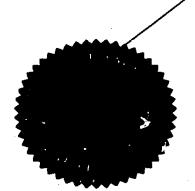
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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: BRYAN APPLEFIELD Address: 8701 N. LAGOON DRIVE. PANAMA CITY BEACH, FL 32407 Vice Chairman: Address: Director: HELEN APPLEFIELD Address: 8701 N. LAGOON DRIVE PANAMA CITY BEACH, FL 32407 Director: Address: _____ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: BRYAN APPLEFIELD Address: 8701 N. LAGOON DRIVE PANAMA CITY BEACH, FL 32407 Vice President: BRYAN SCOTT APPLEFIELD Address: 1133 WEST MAIN STREET DOTHAN, AL 36301 Secretary: HELEN APPLEFIELD Address: 8701 N. LAGOON DRIVE PANAMA CITY BEACH, FL 32407 Treasurer: HELEN APPLEFIELD Address: _ 8701 N. LAGOON DRIVE, PANAMA CITY BEACH, FL 32407 NOTE: If necessary, you may attach an addendum to the application listing additional ers and or directors. agure of Chauman, Vice Chairman, or any officer listed in number 12 of the application) BRYAN APPLEFIELD. PRESIDENT 14. ___

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

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Scal of said State, do hereby certify that the domestic corporation records on file in this office disclose that Crown Financial, Inc. incorporated in Houston County, Dothan, Alabama on July 27, 1995. I further certify that the records do not disclose that said Crown Financial, Inc. has been dissolved.

95 HAY -8 AH 9: 27



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

March 5, 1996

Date

Jin Bennett

Jim Bennett

Secretary of State