

**F96000004413**

TO: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: WILSON INSULATION, 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:

Robert A. Wilson  
(Name of Person)

Wilson Insulation, Inc.  
(Firm/Company)

P.O. Box 360323  
(Address)

Decatur, GA 30034  
(City/State/Zip)

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TALLAHASSEE, FLORIDA

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

Alexandra R. Haught, Attorney at ( 904 ) 651-3011  
(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

**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. Wilson Insulation, 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. 58-1650500

(FBI number, if applicable)

4. 10/26/79

(Date of Incorporation)

5. Perpetual

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

6. No business has been transacted, awaiting Florida authorization

(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.1503, F.S.))

7. P.O. Box 360323

Decatur, GA 30034

(Current mailing address)

8. To engage in and carry on an insulation business, to engage in allied and/or similar businesses, to lease and/or own real property and improvements, to borrow or lend money, to engage in any other lawful activity for which corporations may be permitted  
(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: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: Daniel C. Perri, Attorney at Law

Office Address: 5 Clifford Drive, Suite 12

Shalimar

, Florida, 32579

(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.*

[Signature]  
(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.

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: Robert A. Wilson

Address: 1112 Jimson Circle  
Conyers, GA 30208

Vice Chairman: N/A

Address:

Director: Rebecca J. Wilson

Address: 1112 Jimson Circle  
Conyers, GA 30208

Director:

Address:

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

President: Robert A. Wilson

Address: 1112 Jimson Circle  
Conyers, GA 30208

Vice President: N/A

Address:

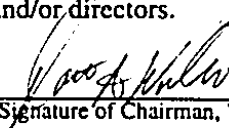
Secretary: Rebecca J. Wilson

Address: 1112 Jimson Circle  
Conyers, GA 30208

Treasurer: Rebecca J. Wilson

Address: 112 Jimson Circle  
Conyers, GA 30208

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)

Robert A. Wilson, Chairman of the Board and President

14. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

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

DOCKET NUMBER : 962130084  
CONTROL NUMBER : 7911327  
DATE INC/AUTH/FILED: 10/26/1979  
JURISDICTION : GEORGIA  
PRINT DATE : 07/31/1996  
FORM NUMBER : 211

ROBERT WILSON  
1112 JIMSON CIRCLE  
CONYERS GA 30208

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF EXISTENCE**

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

**WILSON INSULATION COMPANY**  
**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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WILSON INSULATION COMPANY, INC.  
P.O. BOX 360323  
DECATUR, GA 30036-0323

This will acknowledge receipt of your request for information concerning the withdrawal of authority of a foreign corporation that is transacting business or conducting affairs in Florida. Pursuant to section 607.1520 or 617.1520, Florida Statutes, the following requirements must be met:

- ▶ Complete the withdrawal application printed on the reverse side of this letter.
- ▶ The document must be signed by the chairman or vice chairman of the board of directors or any officer or fiduciary if appropriate (see section 607.0120 or 617.01201, Florida Statutes).
- ▶ Fees for withdrawal are:
  - \$ 35.00 Filing Fee
  - \$ 52.50 Certified Copy (optional)
  - \$ 8.75 Certificate of Status (optional)
- ▶ Send one check for the total amount made payable to the Department of State.
- ▶ Please send application to:

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

For further information, you may call (904) 487-6050.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL  
OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS  
IN FLORIDA**

Wilson Insulation Company

(Name of Corporation)

Georgia

(Incorporated Under Laws Of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

PO Box 360323

(Mailing Address)

Decatur GA 30030

(City/State/Zip)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

  
Signature

X President  
Title

Robert A. Wilson

Typed or printed name

Date