F96000000004556

SUBJECT: _	Architectural Image Manufacturers Inc (Name of corporation - must include suffix)	
Dear Sir or N	ladam:	-09/06/9601079- ++++70.00 ++++
The enclosed	"Application by Foreign Corporation for Authorization trifficate of Existence", and check are submitted to registeration to transact business in Florida.	to Transact Business in or the above referenced
Please return	all correspondence concerning this matter to the following	ng:
	William Bloodworth (Name of Person)	LA 9,
	Architectural Image Manufacturers II (Firm/Company)	SET SET
	2179 Bouldercrest Road SE (Address)	-5 PH12: 1
	Atlanta, Georgia 30316 (City/State/Zip)	
should you n	eed to call someone concerning this matter, please call:	

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.	Architectural Image Manufacturers, Inc. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATED words or abbreviations of like import in language as will clearly indicate that it is a corporation instinatural person or partnership if not so contained in the name at present.)	ON" or end of	A
	Georgia 3. 58-1902282 (State or country under the law of which it is incorporated) (Fill number, if applicable)		
	(Date of Incorporation) 5. Corporated (Duration: Year corp. will cease to "perpetual")		
6.	upon qualification (Date first transacted business in Florida, (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S. Architectural Image Manufacturers Inc.	- ن- - بې	
7.	Architectural Image Manufacturers Inc	:ZH	SE AL
	2179 Bouldercrest Road SE Atlanta, Georgia 30316	-1	S. C.
	(Current mailing address)		
9	fabricate signage (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Flori Name and street address of Florida registered agent: (P.O. Box or Mail Drop Boacceptable)		— <u>•</u> T
	Name: Glenn Bloodworth		
	Office Address: 316 Mexican Drive		
	Cross City , Florida , 32648 Registered agently accompany (Zip Code		
10.	Registered agent's acceptance: (Zip Code	2)	•
regi. ıll s	ring been named as registered agent and to accept service of process for the appropriation at the place designated in this application, I hereby accept the application and agree to act in this capacity. I further agree to comply with the postatutes relative to the proper and complete performance of my duties, and I am for accept the obligations of my position as registered agent. (Registered agent's signature)	ointm	ent as

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: _____ Address: Vice Chairman: ______ Address: _____ Director: Address: _ Director: Address: _____ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: William Bloodworth Address: ___1170 Bethel Road Lithonia, Georgia 30058 Vice President: Stephen Elliott Address: 3311 Spain Road : Lithonia, Georgia 30058 Secretary: Cindy Bloodworth Address: __1170 Bethel Road Lithonia, Georgia 30058 Treasurer: Cindy Bloodworth Address: 1170 Bethel Road lithonia, Georgia 30058 **NOTE:** If necessary you may attach an addendum to the application listing additional officers and or directors. (Signature of Chairman, Wice Chairman, or any officer listed in number 12 of the application) William Bloodworth President

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

Secretary of State Unsiness Information and Services Suite 315, West Comer 2 Martin Unther King Ir. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 962280058
CONTROL NUMBER : 9015621
DATE INC/AUTH/FILED: 08/20/1990
JURISDICTION : GEORGIA
PRINT DATE : 08/15/1996
FORM NUMBER : 211

NELL CRAFT 2179 BOLDERCREST DRIVE ATLANTA GA 301306

CERTIFICATE OF EXISTENCE

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

ARCHITECTURAL IMAGE MANUFACTURERS, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transactionsingess 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 Cope 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

