F9600000 4563

TRANSMITTAL LETTER

| TO: | QUALIFICATION/TAX LIEN SECTION |
|-----|--------------------------------|
| | DIVISION OF CORPORATIONS |

| SUBJECT:S | SURPLUS SOLUTIONS, | INC - | |
|--|---|--|-----------------------------------|
| | (Name of corporation - mu | ust include suffix) | |
| Dear Sir or Madam | -Marting by Foreign Core | poration for Authorization to | Fransact Business in |
| Florida", "Certification foreign corporation | ote of Existence", and cr to transact business in F | lorida. | THE SDOVE ISTURBILLICED |
| Please return all co | rrespondence concerning | this matter to the following: | |
| | RICHARD A. EVA | | 700001907507 -07/30/9601030003 |
| | (Name of Person) | | *****70.00 *****70.00 |
| | <u> </u> | | |
| | (Firm/Company) 2100 ROSWELL ROA | D, SUITE 600F | |
| | (Address) | | , |
| | MARIETTA, GA 300 | | 04 m (48) |
| | (City, State and Zip Co. | de) | Willow GRET |
| Should you need to | o call someone concerning | g this matter, please call: | , |
| RICHARD A. | | 70 579 2700 | |
| (Name of | Person) Are | ea Code & Daytime Telephone Numb | SECRETARY OF CAMPO |
| COURIE | R ADDRESS: | MAILING ADDRESS: | 7. Sign |
| Division o 409 E. G | tion/Tax Lien Sec. of Corporations aines St. see, FL 32399 | Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 | STATE PATIONS 2: 48 |



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 31, 1996

RICHARD A. EVANS COLE & EVANS 2100 ROSWELL RD, SUITE 600F MARIETTA, GA 30062

SUBJECT: SURPLUS SOLUTIONS, INC.

A,

Ref. Number: W96000015987

We have received your document for SURPLUS SOLUTIONS, INC. and your check(s) totaling \$70.00. 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 hame 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. 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 officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

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) 487-6092.

Hart Collins
Senior Corporate Section Administrator
Letter Number: 296A00036667

RESOLUTION OF BOARD OF DIRECTORS

| I, the undersigned John R. Mitchell, President, do hereby certily that this Resolution of | | | | | | | |
|--|--------------------|---|--|--|--|--|--|
| the Board of Directors of Surplus Solutions, Inc., a corporation duly organized and | | | | | | | |
| existing under the laws of the state of Georgia, was duly adopted on | | | | | | | |
| AUGUST: 26, 1996: | | | | | | | |
| Be it resolved, that Surplus Solutions, Inc., organized and existing in the State of Georgia hereby adopts the name, Surplus Property Solutions, Inc. for use in Florida Dated: | 96 SEP -5 PH 2: 48 | SECRETARY OF STATE DIVISION OF COFFORATIONS | | | | | |
| John R. MITCHELL PRESIDENT | | | | | | | |

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. | (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. | (State or country under the law of which it is incorporated) 3. 58-3143138 (FBI number, if applicable) | |
| 4. | (Date of Incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") | _ |
| | Have not yet transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.) 8 | SE SE |
| 7. | Three Downerdy Park, Sule 128 | 흪읆 |
| | 141 Lausta, Oecagia 30338 (Current mailing address) | 77.27.0 77.87.00 77.87.00 77.87.00 |
| | (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NO) | SIAIE ORALINIS E |
| 9. | acceptable) | - |
| , | Name: Corporation Service Company | |
| | Office Address: 1201 Hays Street | |
| | Tallahassee , Florida , 32301 (Zip Code) | |
| | 'ered agent's acceptance: (Zip Code) | |
| | | |
| | 'ns registered agent and to accept service of process for the above designated in this application, I hereby accept the appointm act in this capacity. I further agree to comply with the provist per and complete performance of my duties, and I am familiately position as registered agent. tion Service Company (Registered agent's signature) | ent as ions of |
| | existence duly authenticated, not more than 90 days prior to to the Department of State, by the Secretary of State or other corporate records in the jurisdiction under the law of which it is | |

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: Salan Mitalian Address: 5536 Transporter Dr. Punucida, CiA. 303.38 Vice Chairman: Address: Director: Place Kanwan Address: 4104-4 Denwoody Club Drive AHanla 64 30338 Director: Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: John Mitchell Address: 55% Trubudge Dr. Driverdy 6A 32338 Vice President: Address: Secretary: Alice Kamman Address: 4104-4 Dowerdy Club Drive Atlanta, 69 30350 Treasurer: Address: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. John K. Mitchell , President
(Typed or printed name and capacity of person signing application)

Becretary of State Business Information and Services

Suite 315, West Tomer 2 Martin Author King Ir. Ar. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 961980134
CONTROL NUMBER : 9429953
DATE INC/AUTH/FILED: 11/23/1994
JURISDICTION : GEORGIA
PRINT DATE : 07/16/1996
FORM NUMBER : 211

RICHARD EVANS COLE & EVANS 2100 ROSWELL RD STE 600F MARIETTA GA 30062 EN ED STATE STATE STATE OF STATE AS DEVISION OF STA

CERTIFICATE OF EXISTENCE

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

SURPLUS SOLUTIONS, 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.

Jewis A. Massey

LEWIS A. MASSEY

SECRETARY OF STATE

