F96000004640

CT CORPORATION SYST	гем			
Requestor's Name 660 East Jofferson	Street			
Address Tallahassee, FL 32	2301 222-1092			
City State Zip	Phone			
CORPOR	ATION(S) NAME		15(13(11)) - 09/10/46- +++++ (0.0	1 514 31526 01110 - 029 0
Target Special	ty Programs	luc.		
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() Limited Partnership () Reinstatement	() Annual R () Reservati		() Other UC () Change of () Fic. Na	f R.A.
() Certified Copy	() Photo Co	ples	() CUS	
() Call When Ready Walk In () Mail Out	() Call if Pro	blem	() After 4:30 Pick Up	
Name Availability		PLEASE		
Document Examiner			FILE STAMP	EDG /
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Acknowledgment			<u>;</u>	를 하고 있다. 1953년 - 1971년 - 1971년 1971년 - 1971년
W.P. Verifier				

CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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	. TARGET SPECIALTY PROGRAMS, INC.		
	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPO	RATI	ON" or
	words or abbreviations of like import in language as will clearly indicate that it is a corpo	ration	instead
	of a natural person or partnership if not so contained in the name at present.)		
2.	. Georgia 3. 58-209965	5	
	(State or country under the law of which it is incorporated) (FEI number,		olicable)
	P. L		
4.	(Date of Incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpe	181	
		(uai")	
6.	Mr Upon Qualification		
	(Date first transacted business in Florida, (See sections 607.1501, 607.1502 and 817.1	56, F	.S.//
7.	2440 Sandy Plains Road		
	Marietta, Georgia 30066-5770	-	
	(Current mailing address)		
8.	To engage in any lawful business		
	(Purpose(s) of corporation authorized in home state or country to be carried out in the sta	te of	
	Florida)		
9.	Name and street address of Florida registered agent:	9	<u> </u>
		S	
	Name: <u>C.T. CORPORATION SYSTEM</u>	띤	22
	Office Address: <u>c/o C T Corporation System, 1200 South Pine Island F</u> Plantation , Florida, <u>33324</u> (Zip Code)	ຸຼວັ	
	Office Address: _Cry C / Corporation System. 1200 South Fine Island I	70 <u>00</u>	35.0
	Plantation , Florida, 33324	~~	SS
	Plantation , Florida, <u>33324</u> (Zip Code)		A
		8	85
10.	. Registered agent acceptance:		
or	ving been named as registered agent and to accept service of process for the all poration at the place designated in this application. I hereby accept the application	ointm	ent as
	istered agent and agree to act in this capacity. I further agree to comply with the p		
	statutes relative to the proper and complete performance of my duties, and I am f. If accept the obligations of my position as registered agent.	amilia	er with
776	raccept the obligations of my position as registered agent.		
	C T CORPORATION SYSTEM		
	ann Marie Cummens		
	(Registeled agent's signature) (Officer)		
	ANN MARIE CUMMINS ASSISTANT SUGREDARM		
	(Type Name and Title of Officer)		

- 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:

Secretary: MARK KOTTLER

Address: 3545 N.W. 61st Circle

Boca Raton, Florida 33496

A. DIRE	CTORS				
	Chairman:	MARK KOTTLER			
	Address:	3545 N.W. 61st Circle			
	Vice Chairman	Vice Chairman:			
	Address:				
		ROBERT HANSEN	·····		
	-	· · · · · · · · · · · · · · · · · · ·	••••		
	Address:	1295 Hilton Drive	· · · -		
		Marietta, Georgia 30062			
	Director:		<u></u>		
	Address:				
B. OFFIC	ERS				
	President:	ROBERT HANSEN			
	Address:	1295 Hilton Drive			
		Marietta, Georgia 30062	<u>.</u>		
	Vice President:	STEVEN SIMS			
	Address:	1202 Lexington Avenue	<u></u>		
		New York, New York, 10028			

	Treasurer:	None	
	Address:		
NOTE: and/or d	lf necessary, you i frectors.	by attach an addendum to the application listing additional of	ficers
13	·	Recause,	
(Sign	ature of Chairman, V	Chairman, or any officer listed in number 12 of the application)	
14	Robert Hansen	President	
(Type	d or printed name an	capacity of person signing application)	

Servelary of State Business Information and Services Suite U.D. West Cower 2 Martin Author King Ir. Dr. Allanta, Georgia UNISC-1530

DOCKET NUMBER : 962430575
CONTROL NUMBER : 9404806
DATE INC/AUTH/FILED: 02/24/1994
JURISDICTION : GEORGIA
PRINT DATE : 08/30/1996
FORM NUMBER : 0211

CT CORPORATION SYSTEM RUDENE REMBERT 1201 PEACHTREE STREET, NE ATLANTA, GA 30361

CERTIFICATE OF EXISTENCE

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

TARGET SPECIALTY PROGRAMS, 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 abovenamed 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.



Jenis a. Massey

Lewis A. Massey Secretary of State