# TRANSMITTAL LETTER TO: Qualification/Para Security on old Factions SUBJECT: New Joseph Work Joseph Joseph

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:

<b></b>	0001982500
Chock RickBaseick	-10/22/9601054001 *****70.00 *****70.00
(Name of Person)	
E entry Dorlow Systems ?	Inc.
(Firm/Company)	
235 Beoscuel # 216	
(Address)	38 33
- ALBON, GA 31701	
(City/State/Zip)	ASSE 22
Should you need to call someone concerning this matter, please call:	
(Name of Person) at [1]	436-2501 aytime 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:

(Name of corporation: must include the wold "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) (Fill number, if applicable)	
4. (Date of Incorporation)  5. Oct	
6. (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, (R.S.)	]
7. DUBANY TOWERS - SUITE 216 MG	•
7. DUBANG TOWERS -SUITE 216 MG BILLION CONTROLL OF BEEN 160 (Current mailing address)	)
(Current mailing address)	,
8. (Purpose(s) of corporation muthorized in home state of sountry to be carried out in the state of Florida)	i Y
(Purpose(s) of corporation authorized in home state of country to be carried out in the state of Florida)	1 , - 3
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name: John Commings	
Name: 10h0 Commings  Office Address: 310b-8 Scmoran Blwl.  Onlando , Florida, 32822  10. Registered agent's acceptance: (Zip Code)	
Orlando Florida, 32822	
Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this application, I hereby accept the appointment a registered agent and agree to act in this capacity. I further agree to comply with the provisions 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.  (Registered agent's signature)	1 s f
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.	

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# Decretary of State Business Information and Services Suite 315, West Courer 2 Martin Buther King Ir. Dr. Atlanta, Georgia 30334-1530

# RECEIVED

DOCKET NUMBER :
CONTROL NUMBER :
DATE INC/AUTH/FILED:
JURISDICTION :
PRINT DATE :
FORM NUMBER :

961990444 2 2 1996 9520144 06/26/4995 is, sweat a golusmit GEORG I A 07/17/1996 211

GARDNER, WILLIS ET AL ATTN: DEENA PLAIRE P O DRAWER 71788 ALBANY GA 31708

T22 PH 2:34
TARY OF SIMILARSEE, FLORI

CERTIFICATE OF EXISTENCE

1. the Secretary of State of the State of Georgia, do hereby certify under the

MATIONAL WORKFORCE SYSTEMS, INC.

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
SECRETARY OF STATE