# F96000006521

TO: Qualification/Tax Lien Section **Division of Corporations** SUBJECT: Mac Ladden 4 Associates Zuc.
(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: 100002015171---E -11/27/96--01081--005 \*\*\*\*\*78.75 \*\*\*\*\*78.75 Carry William - (Name of Person) W96-25378 Macfadden & Associates, Inc. 6821 Southpoint Dr. N. Suite 118 Jacksonville FC 32216 Should you need 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



December 4, 1996

LARRY WILLIAMS
MACFADDEN & ASSOCIATES, INC.
6821 SOUTHPOINT DR., N, STE 118
JACKSONVILLE, FL 32216

SUBJECT: MACFADDEN & ASSOCIATES, INC.

Hef. Number: W96000025378

We have received your document for MACFADDEN & ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6097.

Michael Mays Document Specialist

Letter Number: 896A00054386

## 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 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) (FEI number, if applicable)
4. 1975 (Date of Incorporation)  5. Perceto a  (Duration: Year corp. will cease to exist or "perpetual")
6. Cc Fo 6 - 15 1996 (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7. 1320 Fennick Lane Suite 600 9 30
Silver Spring MD  Current mailing address)  Current mailing address)
(Current mailing address)
8. Data Processing Consulting (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Floridal)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Larry Williams
Office Address: 6821 South point Dr. N., Ste 118
Jacksonville, Florida, 32216 (Zip Code)
10. Registered agent's acceptance: (Zip Code)
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.

(Registered agent's signature)

1. Attached is a certificate of existence duly authenticated, not more than 90 do

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.

SECRETAL DIVISION OF
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Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)	
DIRECTORS (Street address only- P. O . Box NOT acceptable) None	
nairman:	
ddress:	•
	-
ice Chairman:	•
ddress:	•
	•
irector:	•
ddress:	_
irector:	_
ddress:	-
	- <sub>u</sub>
OFFICERS (Street address only- P. O. Box NOT acceptable)	30 DEC
resident: James R. Macfadden	- i-
ddress: 12393 KONDRUP DRIVE	- C
FULTON MD 20759	- ر
ice President: John John	- 8
ALEXANDRIA VA 22307	-
<u> </u>	-
ecretary: EVan EVans  Address: 1/729 MORNINGMIST LANE	<del></del>
COLUMBIA MD Z1044	
reasurer: Evan Evans	<u>-</u>
Address: 11729 MORNINGMIST LANE	_
COLUMBIA MD ZIOYY	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
3. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	<del></del>
4. EVAN EVANS SEZY/TREAS	_

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## Community & Minimi



## State Corporation Commission

I Certify the Following from the Records of the Commission:

MACFADDEN & ASSOCIATES, INC. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is November 15, 1995.

Nothing more is hereby certified.

SECRETARY OF STATE SIVISION OF CORPORATIONS



Signed and Sealed at Richmond on this Bate: October 24, 1996

William J. Bridge, Clerk of the Commission