

F 97000005948

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: MAR DIV, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

600002336316--5

-11/03/97-01096-001

*****70.00 *****70.00

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. \$70.00

Please return all correspondence concerning this matter to the following:

GENE MCLEOD

(Name of Person)

MCLEOD & Associates

(Firm/Company)

4065 ANNISTOWN RD

(Address)

LITHONIA, GA 30058

(City/State/Zip)

W97-24962

Should you need to call someone concerning this matter, please call:

GENE MCLEOD

(Name of Person)

at (770) 736-3233

(Area Code & Daytime Telephone Number)

FILED
11/12
97 NOV 12 AM 8:40
SECRETARY OF STATE
DIVISION OF CORPORATIONS

COURIER ADDRESS:

Qualification/Tax Lien Section
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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

November 4, 1997

GENE MCLEOD
MCLEOD & ASSOCIATES
4065 ANNISTOWN RD
LITHONIA, GA 30058

SUBJECT: MAR DIV, INC.
Ref. Number: W97000024962

We have received your document for MAR DIV, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

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 (850) 487-6958.

Lee Rivers
Document Examiner

Letter Number: 797A00053234

LEE,
PLEASE ~~SEE~~ CONNECTIONS
AS YOU REQUESTED - Thanks
for your help.
Gene M. Leod
11-10-97

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 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. MAR DIV, INC.
(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. GEORGIA 3. 58-2280024
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/27/1997 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON Qualification
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. P.O. Box 185
SNELLVILLE GA. 30278
(Current mailing address)

8. CONSULTING SERVICES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: WADE D. CONLEY, JR.

Office Address: 10062 AMIDON ST

SPRING HILL, Florida, 34608
(Zip code)

10. Registered agent's acceptance:

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.

✓ Wade D. Conley Jr.
(Registered agent's signature)

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)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 NOV 12 AM 8:40

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman:

WADE D. CONLEY, JR.

Address:

10062 AMIDON ST.

SPRING HILL, FLA. 34608

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President:

WADE D. CONLEY, JR.

Address:

10062 AMIDON ST.

SPRING HILL, FLA. 34608

Vice President:

Address:

Secretary:

HELEN CONLEY

Address:

10062 AMIDON ST.

SPRING HILL, FLA. 34608

Treasurer:

Address:

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 NOV 12 AM 8:40**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. ☒

WADE D. CONLEY, JR.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

WADE D. CONLEY, JR., CHAIRMAN, PRESIDENT.

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

**Secretary of State
Corporations Division
Suite 315, West Tower
2 Martin Luther King Jr. Dr.
Atlanta, Georgia 30334-1530**

DOCKET NUMBER : 972950063
CONTROL NUMBER : 9704921
DATE INC/AUTH/FILED: 01/27/1997
JURISDICTION : GEORGIA
PRINT DATE : 10/22/1997
FORM NUMBER : 211

MAR DIV, INC.
GENE MCLEOD
4065 ANNISTOWN ROAD
LITHONIA GA 30058

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 NOV 12 AM 8:40

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**MAR DIV, 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.

Lewis A. Massey
LEWIS A. MASSEY
SECRETARY OF STATE

