# F98000002119

Susan B. Culvern Legal Assistant Direct dial (404) 685-4262 Email <sculvern@burr.com> INCLUDING PROFESSIONAL CORPORATIONS)
SUITE 1200, ONE GEORGIA CENTER
600 WEST PEACHTREE STREET
ATLANTA, GEORGIA 30308
(404) 817-3536
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April 10, 1998

#### VIA FEDERAL EXPRESS

# 850/487-6091

Mr. Hart Collins
Florida Department of State
Qualification/Tax Lien Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

000002488460--3 -04/14/98--01079--001 \*\*\*\*\*78.75 \*\*\*\*\*78.75

RE: Florida Registrations

Dear Hart:

Per our telephone conversation, I am forwarding to you the following documents in connection with the registration of Capital Base Corporation, a Georgia corporation, to transact business in Florida, and the registration of said corporation to use a ficticious name.

- 1. Application by Foreign Corporation for authorization to transact business in Florida (with our firm check in the amount of \$78.75); and
- 2. Application for Registration of Ficticious Name (with our firm check in the amount of \$60.00).

Thank you for your help in this matter. Please send to me as soon as they are available the certificates of status in connection with these applications.

Sincerely, BURR & FORMAN LLP

Susan Culvern Legal Assistant

Huntsville
Regency Center
400 Meridian Street, Suite 204
Huntsville, Alabama 35801
(205) 551-0010

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SION OF CORPORATIONS

Atlanta
One Georgia Center
600 West Peachtree Street, Suite 1200
Atlanta, Georgia 30308
(404) 817-3536

Birmingham SouthTrust Tower 420 North Twentieth Street, Suite 3100 Birmingham, Alabama 35203 (205) 251-3000

## TRANSMITTAL LETTER

•	ation/Tax Lien Section of Corporations						
SUBJECT:	CAPITAL BASE CORF	PORATION					
SODSECT.	(Name	e of corporation - must include suffix)					
Dear Sir or Mad	am:						
The enclosed "A "Certificate of E transact business	Existence", and check are s	orporation for Authorization to Transact Business in Florida", submitted to register the above referenced foreign corporation to					
Please return all	correspondence concerning	ing this matter to the following:					
	Susan Culvern,	Legal Assistant					
•		(Name of Person)					
Burr & Forman LLP							
(Firm/Company)							
600 West Peachtree Street, Suite 1200							
		(Address)					
	Atlanta, Georgi	xia 30308					
		(City/State/Zip)					
Should you nee	d to call someone concerni	ning this matter, please call:					
Susan Cül	vern	at ( 404 ) 685-4262					
(Name	e of Person)	(Area Code & Daytime Telephone Number)					
COURIER ADDRESS:		MAILING ADDRESS:					
Qualification/T	ax Lien Section	Qualification/Tax Lien Section					
Division of Co	-	Division of Corporations P.O. Box 6327					
409 E. Gaines S		Tällahassee, 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.

1.		BASE CORPORATION								
	words or abbre	oration; must include the wateriors of like import in larger partnership if not so con	anguage as will	clearly indicate that it	TY", "CORPORATION inst	ON" or ead of a				
2.	Georgia		_	3	58-1968989	.,;				
	(State or country under the law of which it is incorporated) (FEI number, if applicable)									
4.	12/04/9	1	5	Perpetual		· · · · · · · · · · · · · · · · · · ·	<del></del>			
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpet					i o <u>r "perpetual")</u>				
6.		8		<u> </u>			·			
	(Date fire	t transacted business in Fl	orida.) (SEE SE	ECTIONS 607.1501, 60	17.1502 and 817.155	, F.S.)				
7.	c/o Bur	r & Forman LLP A	ttention:	George F. Mayna	rd					
	600 Wes	t Peachtree Stree	t, Suite 12	200, Atlanta, Ge	orgia 30308					
	(Current mailing address)									
				•						
8.	8. any lawful business as noted under OCGA § 14-2-301  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)									
9.	Name and st	reet address of Florida	registered ag	ent: (P.O. Box or M	ail Drop Box <u>NOT</u>	_acceptable)				
	Name:	Mark L. Rosen, E	sq.		·	92	DIV			
0:	ffice Address:	1380 Northeast M	iami Garder	ns Drive, Suite	246	3 APR	ECRET			
		North Miami Beac	h,	Florida	33179	<del></del>				
				, Florida,	(Zip code)	7	350			
						2: 08	STA RAT			
10	). Registered	agent's acceptance:				08	<u> </u>			
in co	this application comply with the p	ned as registered agent and and I hereby accept the approvisions of all statutes religations of my position a	ointment as reg elative to the pr	ristered agent and agre oper and complete per	e to act in this capa	city. I further a	igree to			

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) A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: Fred S. Zohouri Address: 905 Perrins Springs Court Lawrenceville, Georgia 30243 Vice Chairman: \_\_\_\_ Address: Address: B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: \_\_\_\_Fred S.\_Zohouri 905 Perrins Springs Court Lawrenceville, Georgia 30243 Vice President: Address: Secretary: \_ Address: 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) (Typed or printed name and capacity of person signing application)

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

DOCKET NUMBER : 980761354
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JURISDICTION : GEORGIA
PRINT DATE : 03/17/1998

FORM NUMBER : 211

BARR & FORMAN, LLP ATTN: GEORGE MAYNARD STE 1200, 600 W. PEACHTREE ST ATLANTA GA 30308 OIVISION OF CORPORATIONS
98 APR 14 PM 21 08

### 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

## CAPITAL BASE CORPORATION 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.

LEW

SECRETARY OF STATE

