

F98000005056

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: TOTAL Trans Luman Son, Inc
(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:

200002633782-2
-09/08/98-01073-001
*****70.00 *****70.00

M. R. EVANS, Esq.
(Name of Person)

MELVIN R. EVANS

ATTORNEY AT LAW

(Firm/Company)

CERTIFIED PUBLIC ACCOUNTANT

5008 OLD SPRING

POWDER SPRINGS, GA 30127

(Address)

(City/State/Zip)

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

M. R. Evans at (770) 427.0907
(Name of Person) (Area Code & Daytime Telephone Number)

9/9/98
98 SEP -8 PM 3:20
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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

**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. TOTAL TRANSFORMATION, 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. 58-2003331
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. July 1, 1992 5. Perp.
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. OCTOBER 1, 1998 (15 Approved - on 1st day following approval)
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 5008 OLD Spring Court
Powder Springs, GA 30127
(Current mailing address)
8. Over the Road Trucking / Salvage
(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: Robert O'Keefe
Office Address: 816 19th Ave
New Smyrna Beach, Florida, 32169
(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.

Robert O'Keefe
(Registered agent's signature) Robert O'Keefe

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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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: Lajanna O'Keefe

Address: 816th 19th Ave N. S. B. Florida 32169

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: Lajanna O'Keefe

Address: 816 19th Ave. N. S. B. Florida 32169

Vice President: Robert O'Keefe

Address: 816 19th Ave N S B Florida 32169

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]

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

14. Robert O'Keefe, VP - opp's

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

Melvin R. Evans
Attorney at Law
Certified Public Accountant

5008 Old Spring Court
Powder Springs, Georgia 30127

Telephone (770) 427-0907
Facsimile (770) 426-6255

Mobile (404) 406-645
Pager (404) 708-922

August 24, 1998

Florida Department of State
Division Of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Application of Total Transformation, Inc.

Addendum to item 12, form 400.

Vice President: Eleanor F. Evans

Address: 5008 Old Spring Court
Powder Springs, GA 30127

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Secretary of State

Corporations Division

315 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

DOCKET NUMBER : 982370079
CONTROL NUMBER : 9214667
DATE INC/AUTH/FILED: 07/21/1992
JURISDICTION : GEORGIA
PRINT DATE : 08/25/1998
FORM NUMBER : 211

MEL EVANS
5008 OLD SPRING COURT
POWDER SPRING GA 30127

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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

TOTAL TRANSFORMATION, 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

