# F9800000070/0

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	To: Qualification/Tax Lien Section Division of Corporations
×	SUBJECT: Mixon Business Solutions, Inc. (Name of corporation - must include suffix)
	Dear Sir or Madam: $\sqrt{98-28322}$
	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:
	James Lawrence Mixon (Name of Person)
	Mixon Business Solutions, Inc. & Eggs (Firm/Company)
	P. O. Box 2068  (Address)
	Bradenton, FL 34204 & SSG (City/State/Zip)
	Should you need to call someone concerning this matter, please call:  50002714726
	James L. Mixon at (941) 383-7824

#### STREET ADDRESS:

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

(Name of Person)

#### **MAILING ADDRESS:**

(Area Code & Daytime Telephone Number)

Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 18, 1998

JAMES LAWRENCE MIXON MIXON BUSINESS SOLUTIONS, INC. PO BOX 20668 BRADENTON, FL 34204

SUBJECT: MIXON BUSINESS SOLUTIONS, INC.

Ref. Number: W98000028322

We have received your document for MIXON BUSINESS SOLUTIONS, 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 487-6095.

Letter Number: 198A00059528

Jennifer Sindt Document Examiner SECRETARY OF STATE DIVISION OF CORPORATIONS

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMIT REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	TED T	0
1. 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. Grand State or country under the law of which it is incorporated)  3. 58-224709  (FEI number, if applicable)		
4. Dan 12 1996 5. Perpetual (Duration: Year corp. will cease to exist or "perp	etual")	
6. November 01 1998  (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	98	SE
7. P.O. Box 20668	DEC 28	ORE TA
Bradenton, FL 34204 (Current mailing address)	8 A	
8. Data Processing Analysis (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	4 8: 27	FORATIONS
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT accepta	ble)	
Name: James L. Mixon	_	
Office Address: 3708 7and Ave. Civ. E		<u>-</u> -
Saraseta, FL, Florida, 34242 (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 in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fur comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I and accept the obligations of my position as registered agent.  (Registered agent's signature)	rther ag	ree 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. DIRECTO	RS (Street address only - P.O. Box NOT acceptable)
Chairman:	James L. Mixon
Address:	3708 72ND Ave. Cir. East
	Sarasota, FL 34242
Vice Chairmar	Jean A. Mixon
Address:	3708 72 NO Ave. Cir. East
	Sarasota, FL 34242
Director:	
Address:	98 V <sub>I</sub> :
	B DE CR
Director:	200 8 'AT
	A SYM
	G: CRIVE
B. OFFICE	CRS (Street address only - P.O. Box NOT acceptable)
President:	James L. Mixon
Address:	3708 72ND Ave. Cir. East
	Sarasota, FL 34242
Vice Presider	nt: Jean A. Mixon
Address:	3708 78 ND Ave. Cir. East
	Sarasota, FL 34242
Secretary: _	Jean A. Mixon
Address:	(same)
Treasurer: _	James L. Mixon
Address:	(same)
NOTE: If	necessary, you may attach an adderdum to the application listing additional officers and/or directors.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
	Signature of Chairman, Vice Chairman, or any officer listed in Indinder 12 of the approach,  James Lawrence Mixon, President
14	(Typed or printed name and capacity of person signing application)

# **Secretary of State**

Corporations Division
315 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

MIXON BUSINESS SOLUTIONS, INC. P.O. BOX 20668 BRADENTON FL 34204 DOCKET NUMBER : 983340541
CONTROL NUMBER : 9602318
DATE INC/AUTH/FILED: 01/12/1996
JURISDICTION : GEORGIA
PRINT DATE : 11/30/1998

FORM NUMBER : 211

SECRETARY OF STATE DIVISION OF CORPORATIONS
98 DEC 28 AM 8: 27

# 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

### MIXON BUSINESS SOLUTIONS, 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

SECRETARY OF STATE

