

F9900000 2811
TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: CORNERSTONE DETENTION PRODUCTS, 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:

JEFF LEE
(Name of Person)
CORNERSTONE DETENTION PRODUCTS, INC.
(Firm/Company)
1902 CENTRAL PARKWAY SUITE G
(Address)
DECATUR, AL 35601
(City/State/Zip)

FILED
99 JUN -2 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-05/10/99-01108-004
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Should you need to call someone concerning this matter, please call:

JEFF LEE at (256) 355-2396
(Name of Person) (Area Code & Daytime Telephone Number)

STREET 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

Handwritten initials and date: JL 6-2-99

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. CARLESTONE DETENTION PRODUCTS, 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. ALABAMA (State or country under the law of which it is incorporated) 3. 63-1196091 (FEI number, if applicable)

4. 3/4/98 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. NONE (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 1902 CENTRAL PARKWAY SUITE G DELTA, AL 35601 (Current mailing address)

8. ANY AND ALL LEGAL ACTIVITIES (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: CT Corporation System

Office Address: 1200 South Pine Island Road Plantation, Florida, 33324 (Zip code)

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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.

Dale W. Morris (Registered agent's signature)

DALE W. MORRIS ASSISTANT VICE PRESIDENT

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: CHARLES M. CLARON

Address: 1902 CENTRAL PARKWAY SUITE 6
DECATUR, AL 35601

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: CHARLES M. CLARON

Address: 1902 CENTRAL PARKWAY SUITE 6
DECATUR, AL 35601

Vice President: _____

Address: _____

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

14. CHARLES M. CLARON, PRESIDENT
(Typed or printed name and capacity of person signing application)

STATE OF ALABAMA

I, **Jim Bennett**, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Cornerstone Detention Products, Inc. incorporated in Morgan County, Decatur, Alabama on March 4, 1998. I further certify that the records do not disclose that said Cornerstone Detention Products, Inc. has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

May 21, 1999

Date

Handwritten signature of Jim Bennett in cursive script.

Jim Bennett

Secretary of State