TOMONAN-

| - THANSIMITY | ALLEUTER > | 645 |
|---|---|---|
| To: Registration Section Division of Corporations | | |
| SUBJECT: Best Leab Serv | ion - must include suffix) | |
| Dear Sir or Madam: | | |
| The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida. | r Authorization to Transact Bu register the above referenced | siness in Florida", foreign corporation to |
| Please return all correspondence concerning this matter | er to the following: | |
| LINDA Roebuck | | |
| (Name o | of Person) | |
| Best LeAO Service, Inc | | |
| (Firm/C | omnany) | |
| P.O. BOX 1832 | 631 MADDO | 5x01 #7 |
| | dress) | |
| Ellisty GA | 3 OSYO | w99-15058 |
| Should you need to call someone concerning this matt | :31010 ter, please call: | 0029157899 06/25/9901068011 *****87.50 *****87.50 |
| | , 636-4592 | <u> </u> |
| (Name of Person) (Are | ea Code & Daytime Telephone | : Number) |
| STREET ADDRESS: | MAILING ADDRESS: | SECRET WAT 1/5 |
| Registration Section | Registration Section | <u> </u> |
| Division of Corporations 409 E. Gaines St. | Division of Corporations P.O. Box 6327 | |
| Tallahassee, FL 32399 | Tallahassee, FL 32314 | |
| Enclosed is a check for the following amount: | | D: 43 |
| □ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Z Certified Copy | \$87.50 Filing Fee, Certificate of Status & |



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 29, 1999

LINDA ROEBUCK BEST LEAD SERVICE, INC. PO BOX 1832 / 631 MADDOX DR. #7 ELLIJAY, GA 30540

SUBJECT: BEST LEAD SERVICE, INC.

Ref. Number: W99000015058

We have received your document for BEST LEAD SERVICE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

In line 8, please describe the type of business that the corporation will be doing in Florida. A short description is fine, and you may use white-out. We are enclosing a new, blank form if you would rather use that.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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 Specialist

Letter Number: 999A00034215

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. Best Lead Service, 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. Glorgia (State or country under the law of which it is incorporated) 4. May 27, 1997 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 6. Survej4, 1999 (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") |
| (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. a. 63 MADDOX DOX DOX TELLIFORM GA 30540 (Principal office address) b. P.O. Box 1832 Elliform GA 30540 (Current mailing address) |
| 8. MARKeting Heath This Cance for Agents (Purpose(s) of corporation authorized at nome 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) of Name: PiAnne Allen . Office Address: 268(E) Blanding Blud. ORANGE Park Pl. , Florida 32065 |
| 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 on as registered agent. (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 business addresses of officers and/or directors: | |
|---|--|
| A. DIRECTORS | |
| Chairman: | |
| Address: | |
| | |
| Vice Chairman: | |
| Address: | |
| | <u> </u> |
| Director: | |
| Address: | |
| | |
| Director: | |
| Address: | |
| | |
| B. OFFICERS | |
| President: LiNDA Rochuck | |
| Address: 631 MADDOX Dr. #7 | 7 SE |
| Ell'ISAY GA 30540 | 至 : |
| Vice President: Chery L Stansky | |
| Address: 631 MADOOX D #7 | <u> </u> |
| Ellisty on 30540 | RATE 5 |
| Secretary: Cheryh Stansky | |
| Address: 631 MADDOX Dr. #7 | |
| E/1:50m GA 305/0 | |
| Treasurer: LINDA Roebuck | |
| Address: 631 MADDOX Dr #7 | |
| 15/15Ay 6A 30540 | *************************************** |
| | 112 1 00 |
| NOTE: If necessary, you may attach an addendum to the application lists | ng additional officers and/or directors. |
| 13. (Signature of Chairman, Vice Chairman, or any officer lie | sted in number 12 of the application) |
| 11 LINDA Rochuck Presi | _ |

(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 DOCKET NUMBER : K91890006

CONTROL NUMBER : K724963

DATE INC/AUTH/FILED: 05/27/1997

JURISDICTION : GEORGIA

PRINT DATE : 07/08/1999

FORM NUMBER : 211

LINDA ROEBUCK 631 MADDOX DRIVE, STE 7 ELLIJAY, GA 30540

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

BEST LEAD SERVICE, 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 abovenamed 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-facile evidence that gaid entity is in existence or is authorized to transact business in this state.

July Cope

