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(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  (Document Number)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		
(City/State/Zip/Phone #)    PICK-UP	(Requestor's Name)	
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2007 DEC -7 PM 2: 46
SECRETARY OF STATE
TALLAHASSEE.FLORID:



Florida Secretary of State Registration/Tax Lien Section New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Dear Sir/Madam,

Enclosed is the application for four Foreign Filings in your State with the necessary funds (\$422.50). They are:

Consolidated Business Services, Inc	<b>c.</b>	\$87.50
Domain Computers, Inc.		\$87.50
Curney & Harris Enterprises, Inc.		\$87.50
Spencer Business Enterprises, LLC		\$160.00
	Total	\$422.50

You can return the certified document to each company at their business mailing address. If you have any questions about these applications you came contact me at 770-664-9900 office or 404-964-7184 cell.

Sincerely,

Veshay White



### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 28, 2007

GREGORY HARRIS CURNEY & HARRIS ENTERPRISES, INC. 6805 BURKHEAD DR. UNION CITY, GA 30291

SUBJECT: CURNEY AND HARRIS ENTERPRISES, INC.

Ref. Number: W07000057775

We have received your document for CURNEY AND HARRIS ENTERPRISES, INC. and your check(s) totaling \$422.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return 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) 245-6934.

Letter Number: 507A00067470

Loria Poole Regulatory Specialist II

Division of Corporations - P.O. ROY 6397 - Tallahassae Florida 39314

## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: CUENCY HOPE'S Ent	exposes, INC.
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation 1. Authorize "Certificate of Existence," and check are submitted to register thransact business in Florida.	ation to Transact Business in Florida," or above referenced foreign corporation to
Please return all correspondence concerning this matter to the fo	ollowing:
Chenery + Harris Enterposes (Firm Company)	INC.
6805 Buekhead De.	
Union City Creorgia 30 (City/State and Kip of	291
For further information concerning this matter, please call:	
Roshaed Chenery at (404 35) (Name of Person) (Area Code & 1)	3-9326 Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
	Filing Fee & S87.50 Filing Fee, ied Copy Certificate of Status & Certified Copy

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

REGISTER A FOREIGN CORPORATION TO TRANSACT DESCRIPTION OF FLORIDA.  (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  "Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")	
Cand H Enterprises INC.  (If name unavailable in Florida, enter alternate corporate name peed for the purpose of transacting business in Florida)  2. George A  (State or country under the law of which it is incorporated)  (Fell number, if applicable)	٠.
(Date of incorporation)  (Date of incorporation)  (Date first transacted business in Morida, if p for to registration)  (SEE SECTIONS 607.1501 & 607.15 \ F.S., to d. crmine penalty liability)	
(Principal office address)  (a805) Burkhead Dr. Wilm Office (Current mailing address)	
8. (Purpose(s) of corporation authorized in home state or country to be corried out in state of Florida)  9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Charley Holles	The second secon
Office Address: OO S.W. OM OI (City) Florida 33 30 (Zip code)	
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, further agree to comply with the provisions of all statutes relative to the proper and complete performance of my durand I am familiar with and accept the obligations of my position as registered agent.	1
(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:
Director:
Address:
Director:
Address:
B. OFFICERS
Address: 6805 Burchlad Dr.
Union Offis GA 30291
Vice President: Rashard. Curney
Address: 1805 Purkhood DR.
Million Catry GA 30291
0.
Secretary:
Address:
Treasurer:
Address:
NOTE: If pecessary, you may at ach an addendum to the application ilsting additional officers and/or directors.
13. Signature of Director of Officer listed in number (2 of the application)
14. Apropriate of ARRIGE - Pres
(Typed or printed name and capacity of person a going application)

Control No. 0002083

## STATE OF GEORGIA

## Secretary of State

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

# CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

### **CURNEY & HARRIS ENTERPRISES, INC.**

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 12/28/1999 in Georgia. 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 16th day of November, 2007

Haun Chandel

Karen C Handel Secretary of State

Certification Number: 1857897-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp