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(Re	equestor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
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COVER LETTER

TO: New Filing Section Division of Corporations	
1 P. b. D. 2 d A	e Inc
SUBJECT: High Bridge Associate	
Name of corporat	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact bus	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	atter to the following:
Elise Redell	
	of Person
High Bridge Associates, Inc	
Firm/C	Company
3260 Pointe Pkwy Ste 200	
Ac	ldress
Norcross, GA 30092	
City/Sta	te and Zip code
Elise.Redell@hba-inc.com	
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, plea	se call:
Loo Croopen 770	720 9755
Lee Greeson at (770	
Name of Person Ar	ea Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
New Filing Section	New Filing Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
■ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy 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.

Georgia (State or country under the la 09/05/2003 (Date of incorpor	aw of which it is incorporated) station)	e adopted for the purpose of transacting by 20-0224961 (FEI number, if applical (Duration: Year corp. will cease to ex	bie)
Georgia (State or country under the la 09/05/2003 (Date of incorpor) (S 3260 Pointe Pky	aw of which it is incorporated) station) (Date first transacted business	(FEI number, if applical Perpetual (Duration: Year corp. will cease to ex	bie)
Georgia (State or country under the la 09/05/2003 (Date of incorpor) (S 3260 Pointe Pky	aw of which it is incorporated) station) (Date first transacted business	(FEI number, if applical Perpetual (Duration: Year corp. will cease to ex	bie)
(State or country under the la 09/05/2003 (Date of incorpor) (S 3260 Pointe Pky	sw of which it is incorporated) 5 ration) (Date first transacted business	(FEI number, if applical Perpetual (Duration: Year corp. will cease to ex	
(Date of incorpor (S 3260 Pointe Pkv	ration) (Date first transacted business	(Duration: Year corp. will cease to ex in Florida, if prior to registration)	ist or "perpetual")
(Date of incorpor (S 3260 Pointe Pkv	ration) (Date first transacted business	(Duration: Year corp. will cease to ex in Florida, if prior to registration)	ist or "perpetual")
3260 Pointe Pkv	(Date first transacted business EE SECTIONS 607.1501 & 607.	in Florida, if prior to registration)	
3260 Pointe Pkv	(Date first transacted business EE SECTIONS 607.1501 & 607.	in Florida, if prior to registration)	
3260 Pointe Pkv	EE SECTIONS 607.1301 & 607.		
	W Sta 200 Norgras		
3260 Pointe Pkw	(Principal office ad		
OZOO I OIIIC I KVI	•	•	
	(Current mailing ad	·	
	(Carron maning ac		
Project Manage	ement		
(Purpose(s) of corpora	ation authorized in home state or	country to be carried out in state of Florid	a)
Name and street address	of Florida registered agent: (P	P.O. Box NOT acceptable)	⊉ંદ્ર చ
Busir	ness Filings Incorpor	ated	
TABLIC.		milanesia.	JL 25 PI RETARY O VHASSEE
ffice Address: 313	E. Park Avenue		
Talla	hassee	, Florida 32301	PH 12: * OF 3 is
	(City)	(Zip code)	[일본 첫
). Registered agent's acc			意制 コ

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.

(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: Debra Maehr Address: 3260 Pointe Pwky Ste 200 Norcross, GA 30092 Vice Chairman: Steve Maher Address: 3260 Pointe Pwky Ste 200 Norcross, GA 30092 Director: Address: Director: Address: **B. OFFICERS** President: Steve Maehr Address: 3260 Pointe Pwky Ste 200 Norcross, GA 30092 Vice President: Address: _ Secretary: Debra Maehr Address: 3260 Pointe Pwky Ste 200 Norcross, GA 30092 Treasurer: Steve Maehr Address: 3260 Pointe Pwky Ste 200 Norcross, GA 30092 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. Steve Maehr President

STATE OF GEORGIA

Secretary of State **Corporations Division** 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED: September 05, 2003

: 0348845

JURISDICTION : Georgia

PRINT DATE : 6/27/2013 2:42:20 PM

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

HIGH BRIDGE ASSOCIATES, INC. A Domestic 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.



B: P.W Brian P. Kemp Secretary of State

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