

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

FILED

06 AUG 28 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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08/29/06--01002--007 **50.00

This space for office use only

Section 1

1. Dailyprosurf
 Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

13 S. Calhoun St.
 Mailing Address of Business

Quincy FL 32351
 City State Zip Code

3. Florida County of principal place of business: Gadsden
 (see instructions if more than one county)

Section 2

A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1. Bowdoin Thomas A. 2. _____
 Last First M.I. Last First M.I.

13 S. Calhoun St.
 Address

Quincy, FL 32351
 City State Zip Code

Address _____
 City State Zip Code _____

B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):

1. _____ 2. _____
 Entity Name Entity Name

Address _____ Address _____

City State Zip Code _____ City State Zip Code _____

Florida Registration Number _____ Florida Registration Number _____

FEI Number: _____ FEI Number: _____

Applied for Not Applicable Applied for Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

Thomas A. Bowdoin 8/24/08
 Signature of Owner Date Signature of Owner Date

Phone Number: _____ Phone Number: _____

Section 4

**FOR CANCELLATION COMPLETE SECTION 4 ONLY:
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:**

I (we) the undersigned, hereby cancel the fictitious name _____
 _____, which was registered on _____ and was assigned
 registration number _____

Signature of Owner Date Signature of Owner Date

Mark the applicable boxes Certificate of Status — \$10 Certified Copy — \$30

NON-REFUNDABLE PROCESSING FEE: \$50

DR. Williams AUG 28 2008