

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

**CERTIFICATE OF REINSTATEMENT**

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

**The Community Resource Counseling Group,LLC**  
**a Domestic Limited Liability Company**

was formed on 05/09/2013, and later administratively dissolved on 02/16/2016. Said entity has filed an application for reinstatement and has paid all fees and penalties due to the Secretary of State. Attached hereto is a true and correct copy of said application.

WHEREFORE, said entity is hereby reinstated as of 03/07/2019, having met the requirements for reinstatement under Title 14 of the Official Code of Georgia Annotated. The reinstatement shall relate back to and take effect as of the date of the administrative dissolution and the entity may resume its business as if the administrative dissolution had never occurred.

WITNESS my hand and official seal in the City of Atlanta  
and the State of Georgia on **03/15/2019**.



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### Application for Reinstatement

\*Electronically Filed\*

Secretary of State

Filing Date: 3/7/2019 3:23:00 PM

#### BUSINESS INFORMATION

**BUSINESS NAME** : The Community Resource Counseling Group,LLC

**CONTROL NUMBER** : 13417625

**BUSINESS TYPE** : Domestic Limited Liability Company

**ADMINISTRATIVE DISSOLUTION DATE** : 02/16/2016

Ground(s) for the administrative dissolution either did not exist or have been eliminated. All taxes owed by the entity have been paid.

#### ADDRESS AND REGISTERED AGENT AT TIME OF ADMINISTRATIVE DISSOLUTION

**PRINCIPAL OFFICE ADDRESS** : 2580 Summer Lake Rd apt 6202, Lithia Springs, GA, 30122

**REGISTERED AGENT NAME** : Jameca Shonta West

**REGISTERED OFFICE ADDRESS** : 2580 Summer Lake Rd Apt 6202, Lithia Springs, GA, 30122, USA

**REGISTERED OFFICE COUNTY** : Douglas

#### UPDATES TO ADDRESS AND REGISTERED AGENT

**PRINCIPAL OFFICE ADDRESS** : 6317 Selborn Dr SW Atlanta, GA, Atlanta, GA, 30133, USA

**REGISTERED AGENT NAME** : Jameca West

**REGISTERED OFFICE ADDRESS** : 6317 Selborn Dr SW, Atlanta, GA, 30133, USA

**REGISTERED OFFICE COUNTY** : Fulton

#### AUTHORIZER INFORMATION

**AUTHORIZER SIGNATURE** : Jameca West

**AUTHORIZER TITLE** : Registered Agent