

```
=====
BUS ID:      10788      BUS NAME:  KENNETH B. CLOUD ONLINE TRAINING      TOTAL LICENSES:      1
=====
```

```
BUS ADD'L:
BUS TYPE:  RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active
```

BUSINESS INFORMATION

```
-----
Business Address:      Billing/Mailing Address:
-----
KENNETH B. CLOUD ONLINE TRAINING      KENNETH B. CLOUD
3095 ASHLAND CT      3095 ASHLAND CT
DOUGLASVILLE , GA  30135      DOUGLASVILLE , GA  30135

Ph:      (678) 871-3340      Ph:      (678) 871-3340
Fax:
Car-Rt:      Car-Rt:
```

```
Business Contact:
-----
Name:  KEN CLOUD      Name 2:
Ph:    (678) 273-6778
Email: KEN@KBCCDLTRAINING.COM
```

```
=====
BUS ID:      10776      BUS NAME:  SEED OF JOY YOGA      TOTAL LICENSES:      1
=====
```

```
BUS ADD'L:
BUS TYPE:  RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active
```

BUSINESS INFORMATION

```
-----
Business Address:      Billing/Mailing Address:
-----
SEED OF JOY YOGA      KATRINA L. LAWSON
3241 BAKEWELL ST      3241 BAKEWELL ST
DOUGLASVILLE , GA  30135      DOUGLASVILLE , GA  30135

Ph:      (404) 276-1279      Ph:      (404) 276-1279
Fax:
Car-Rt:      Car-Rt:
```

```
Business Contact:
-----
Name:  KATRINA L. LAWSON      Name 2:
Ph:    (404) 276-1279
Email: SEEDOFJOYOGA@GMAIL.COM
```

```
=====
BUS ID:      10785      BUS NAME:  ELITE RADIOLOGY OF GEORGIA, LLC      TOTAL LICENSES:      1
=====
```

```
BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active
```

BUSINESS INFORMATION

```
-----
Business Address:      Billing/Mailing Address:
-----
ELITE RADIOLOGY OF GEORGIA, LLC      INDIA WEBB-MCQUAY
939 BOB ARNOLD BLVD      4511 N. HIMES AVE.
LITHIA SPRINGS, GA  30122      TAMPA, FL  33614

Ph:      (772) 834-9433      Ph:
Fax:
Car-Rt:      Car-Rt:
```

```
Business Contact:
-----
Name:  AMY BAKER      Name 2:NOZOMI MUELLER
Ph:    (772) 834-9433
Email: ABAKER@ELITERADGA.COM
```

```
=====
BUS ID:      10761      BUS NAME:  BELL'S FRAGRANCES      TOTAL LICENSES:      1
=====
```

06/05/2019  
08:25 AM

BUSINESS LISTING REPORT - DETAIL FOR CITY OF DOUGLASVILLE  
ALL RECORDS

Page: 2/12  
DB: Douglasville

BUS ADD'L:  
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS  
BUS STATUS: Active

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
BROWN, LEILA                                   ATTN: BUSINESS OWNER
1208 BRENTWOOD CT.                             1208 BRENTWOOD CT.
DOUGLASVILLE , GA 30135                     DOUGLASVILLE , GA 30135

Ph:      (770) 845-7434                         Ph:      (770) 845-7434
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: LEILA BROWN                               Name 2:
Ph:      (770) 845-7434
Email: LCBROWN18@COMCAST.NET

```

```

=====
BUS ID:      10775          BUS NAME:  AWFM LTD. COMPANY          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
AWFM LTD. COMPANY                             FERNEIS WHITE AND NATHANIEL WHITE
7405 BRISTOL CIR                               2929 POST RD UNIT 911
DOUGLASVILLE, GA 30134                     WINSTON, GA 30187

Ph:      (678) 334-6278                         Ph:
Fax:      (770) 809-3678                       Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: NATHANIEL WHITE                           Name 2: FERNEIS WHITE
Ph:      (305) 859-1727
Email: NWHITE@GOATLWEST.COM

```

```

=====
BUS ID:      10581          BUS NAME:  ITAV PROJECT 48 FOUNDATION, INC.          TOTAL LICENSES:      2
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
JOHNSON, MARY                                  ITAV PROJECT 48 FOUNDATION, INC.
6790 W BROAD ST                               6790 W BROAD ST
Douglasville, GA 30134                       C/O: MARY JOHNSON
                                                Douglasville, GA 30134

Ph:      (800) 280-5191                         Ph:      (800) 280-5191
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MARY JOHNSON                             Name 2:
Ph:      (800) 280-5191
Email: MARYDALEVILLE4@AOL.COM

```

```

=====
BUS ID:      10769          BUS NAME:  SMOOTH GETAWAYS TRAVEL AGENCY, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
RICARDO HUNTER                                RICARDO HUNTER
5309 BRODICK LN                               5309 BRODICK LN
LITHIA SPRINGS, GA 30122                     LITHIA SPRINGS, GA 30122

Ph: (313) 287-6058                            Ph: (313) 287-6058
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: RICARDO HUNTER                          Name 2:
Ph: (313) 287-6058
Email: SMOOTHGTRAVEL@GMAIL.COM

```

```

=====
BUS ID: 10790      BUS NAME: DRIVE MORE AUTO, LLC      TOTAL LICENSES: 1
=====

```

```

BUS ADD'L:
BUS TYPE: COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
DRIVE MORE AUTO, LLC                          DRIVE MORE AUTO, LLC
8333 C OFFICE PARK DR SUITE C                 8333-C OFFICE PARK DR SUITE C
Douglasville, GA 30134                       Douglasville, GA 30134

Ph: (678) 831-8130                            Ph: (678) 831-8130
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: JACQUESON ELIE                          Name 2: WANDA ELIE
Ph: (404) 713-5890
Email: DRIVEMOREAUTO@GMAIL.COM

```

```

=====
BUS ID: 10781      BUS NAME: SUMMIT GUTTERS SERVICES, LLC      TOTAL LICENSES: 1
=====

```

```

BUS ADD'L:
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
FERNANDO SANCHEZ                              FERNANDO SANCHEZ
1432 CAVE SPRINGS RD                          1432 CAVE SPRINGS RD
Douglasville, GA 30134                       Douglasville, GA 30134

Ph: (678) 908-1310                            Ph: (678) 908-1310
Fax:                                           Fax:
Car-Rt:                                        Car-Rt:

Business Contact:
-----
Name: FERNANDO SANCHEZ                        Name 2:
Ph: (678) 908-1310
Email: FERNANDOSANCHEZ06@YAHOO.COM

```

```

=====
BUS ID: 10758      BUS NAME: MOONSHINE BEVERAGE CORPORATION      TOTAL LICENSES: 1
=====

```

```

BUS ADD'L:
BUS TYPE: COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
MOONSHINE BEVERAGE CORPORATION                MAHENDRA PATEL
2981 CHAPEL HILL RD                            5479 WESTMORELAND PLAZA
DOUGLASVILLE , GA 30135                     Douglasville, GA 30134

Ph:      (404) 667-9320                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MIKE PATEL                               Name 2:JADE CHEONG
Ph:      (404) 667-9320
Email: PATELMIKE72@YAHOO.COM

```

```

=====
BUS ID:      10773          BUS NAME:  ENVISION REALTY GROUP          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
ENVISION REAL ESTATE GROUP, LLC                MICHELLE AVERY
6472 CHURCH ST                                6472 CHURCH ST
Douglasville, GA 30134                       Douglasville, GA 30134

Ph:      (770) 949-7704                        Ph:
Fax:      (770) 573-9491                      Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MICHELLE AVERY                           Name 2:
Ph:      (770) 842-7547
Email: MICHELLE9953@COMCAST.NET

```

```

=====
BUS ID:      10772          BUS NAME:  SWEET SOUTHERN LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
REBECCA SMITH                                 REBECCA SMITH
6671 CHURCH ST                                5538 TWIN OAK DR.
Douglasville, GA 30134                       DOUGLASVILLE , GA 30135

Ph:      (423) 413-1839                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: REBECCA SMITH                            Name 2:KENNETH BREWER
Ph:
Email: SWEETSOUTHERNLLC@GMAIL.COM

```

```

=====
BUS ID:      10777          BUS NAME:  HAIR BLENDZ & BEAUTY BAR    TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
HAIR BLENDZ & BEAUTY BAR                       ROBBIE LEE
7447 DOUGLAS BLVD SUITE 106                   8928 WESTERN PINES DR.
DOUGLASVILLE , GA 30135                   Douglasville, GA 30134

Ph:      (951) 858-9742                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: ROBBIE LEE                               Name 2:TONYA BOYD
Ph:      (951) 858-9742
Email: ROBBIELEE6@HOTMAIL.COM

```

```

=====
BUS ID:      10774          BUS NAME:  AMBIENCE EVENT SPACE, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
AMBIENCE EVENT SPACE, LLC                     ELAINE LOVELADY
2127 FAIRBURN RD SUITE D                     3134 FAR EMERALD LAND
DOUGLASVILLE , GA 30135                   UNION CITY, GA 30291

Ph:      (770) 864-8140                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: ELAINE LOVELADY                         Name 2:MARCUS MAYFIELD
Ph:      (770) 864-8140
Email: ELAINE.LOVELADY@YAHOO.COM           BUSINESS EMAIL: AMBIENCEEVENTSATL@GMAIL.COM

```

```

=====
BUS ID:      10763          BUS NAME:  WEST EXOTIC AUTO BROKERS LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
WEST EXOTIC AUTO BROKERS LLC                 WEST EXOTIC AUTO BROKERS LLC
6364 FAIRBURN RD                             6364 FAIRBURN RD
Douglasville, GA 30134                       Douglasville, GA 30134

Ph:      (678) 523-3415                       Ph:      (678) 523-3415
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MELESSE EMBU WEST                       Name 2:
Ph:      (678) 523-3415
Email: BILLYRAYCOWBOY@GMAIL.COM

```

```

=====
BUS ID:      10787          BUS NAME:  DC LIGHTNING SOLUTIONS, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
DC LIGHTNING SOLUTIONS, LLC                    DAVID CELIS
6405 FAIRBURN RD                               9365 OPAL DRIVE
Douglasville, GA 30134                       DOUGLASVILLE , GA 30135

Ph:      (770) 378-4852                        Ph:
Fax:     (770) 450-8223                       Fax:
Car-Rt:                                     Car-Rt:

Business Contact:
-----
Name:    DAVID CELIS                          Name 2:
Ph:     (770) 378-4852
Email:  DAVID.CELIS79@GMAIL.COM

```

```

=====
BUS ID:    10789          BUS NAME:  ALLEVIATION WELLNESS CHIROPRACTIC          TOTAL LICENSES:    1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
ALLEVIATION, LLC                              ALLEVIATION, LLC
9559 HIGHWAY 5 SUITE 204                     9559 HIGHWAY 5 SUITE 204
DOUGLASVILLE , GA 30135                   DOUGLASVILLE , GA 30135

Ph:      (678) 306-6449                       Ph:
Fax:                                           Fax:
Car-Rt:                                     Car-Rt:

Business Contact:
-----
Name:    PASQUEAL BIGOMS                      Name 2:SHAVON BIGOMS
Ph:     (678) 427-4644
Email:  PBIGOMS@GMAIL.COM

```

```

=====
BUS ID:    10766          BUS NAME:  BIG RIPS DETAILING AND HAND WASH          TOTAL LICENSES:    1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
ELI SMITH                                     ELI SMITH
8400 HOSPITAL DR SUITE B                     8400 HOSPITAL DR. SUITE B
Douglasville, GA 30134                       Douglasville, GA 30134

Ph:      (678) 485-1720                       Ph:
Fax:                                           Fax:
Car-Rt:                                     Car-Rt:

Business Contact:
-----
Name:    ELI SMITH                            Name 2:CECELIA SMITH
Ph:     (678) 485-1720
Email:  BIGRIPSDetailing@comcast.net

```

```

=====
BUS ID:    10765          BUS NAME:  ONE & ONLY LOGISTICS LLC          TOTAL LICENSES:    1
=====

```

```

BUS ADD'L:
BUS TYPE:  RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
JOHNNY L LEWIS                                  JOHNNY L LEWIS
7834 LAKE CREST WAY                             7834 LAKE CREST WAY
DOUGLASVILLE, GA 30134                       DOUGLASVILLE, GA 30134

Ph: (770) 899-9733                               Ph:
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: JOHNNY L LEWIS                             Name 2:
Ph: (770) 899-9733
Email: JLLEWIS1762@GMAIL.COM

```

```

=====
BUS ID:      10778          BUS NAME:    QUALITY CLEANING ONE LLC          TOTAL LICENSES:    1
=====

```

```

BUS ADD'L:
BUS TYPE:    RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
QUALITY CLEANING ONE LLC                       QUALITY CLEANING ONE LLC
6308 LINECREST DR                             6308 LINECREST DR
Douglasville, GA 30134                       Douglasville, GA 30134

Ph: (202) 438-4616                               Ph: (240) 241-3766
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: CALVIN JOHNSON                             Name 2:BRITTANY WADE
Ph: (202) 438-4616
Email: QUALITYCLEANINGONE@GMAILLCON

```

```

=====
BUS ID:      10779          BUS NAME:    MURPHY'S MOBILE AUTO DETAILING    TOTAL LICENSES:    1
=====

```

```

BUS ADD'L:
BUS TYPE:    RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
EURIEL MURPHY CAMPBELL JR.                   EURIEL MURPHY CAMPBELL JR.
7019 MORNINGSIDE CT                           7019 MORNINGSIDE CT
Douglasville, GA 30134                       Douglasville, GA 30134

Ph: (678) 457-8202                               Ph: (678) 457-8202
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: MURPHY CAMPBELL                           Name 2:CARLA CAMPBELL
Ph: (678) 457-8202
Email: MCAMPBELL5DETAILS@YAHOO.COM

```

```

=====
BUS ID:      10784          BUS NAME:    GRILL IT HOT DOG & MORE          TOTAL LICENSES:    1
=====

```

```

BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```



BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
MELVIN AKINS                                   MELVIN AKINS
1516 MUNICIPAL PKWY                             1330 PICKLE RD.
Douglasville, GA 30134                         Douglasville, GA 30134

Ph:      (404) 553-3574                         Ph:      (404) 553-3574
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MELVIN AKINS                               Name 2:
Ph:      (404) 553-3574
Email: MELAKINS63@GMAIL.COM

```

```

=====
BUS ID:      10759          BUS NAME:  SERENITY QUALITY CARE, LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
SERENITY QUALITY CARE, LLC                     AYANA NELSON
8305 OFFICE PARK DR SUITE K                   8305 OFFICE PARK DR SUITE K
Douglasville, GA 30134                       Douglasville, GA 30134

Ph:      (404) 246-0498                         Ph:      (404) 246-0498
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: AYANA NELSON                               Name 2: SUSIE NELSON
Ph:      (404) 246-0498
Email: AYANANELSON27@GMAIL.COM

```

```

=====
BUS ID:      10771          BUS NAME:  TASSO'S KETTLE KORN, LEMONADE, SHAVED ICE, AND TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
TASSO'S KETTLE KORN, LEMONADE, SHAVED ICE, AND FRUTASSO STRATAS
OUT OF CITY LOCATION                           4508 MAGNOLIA DRIVE
, AL                                           BIRMINGHAM, AL 35242

Ph:      (205) 995-6111                         Ph:      (334) 201-4222
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: TASSO STRATAS                               Name 2:
Ph:      (205) 995-6111
Email: TEESTRAT@AOL.COM

```

```

=====
BUS ID:      10764          BUS NAME:  NATIVE QUEEN COLLECTION LLC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
LATESHA SHUNTEL A OWENS                       LATESHA SHUNTEL A OWENS
417 PRESTON LANDING CIR                       417 PRESTON LANDING CIR
LITHIA SPRINGS, GA 30122                     LITHIA SPRINGS, GA 30122

Ph:      (404) 483-0274                       Ph:      (404) 483-0274
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: LATESHA OWENS                           Name 2:
Ph:   (404) 483-0274
Email: NATIVE.QUEEN.COLLECTION@GMAIL.COM

```

```

=====
BUS ID:      10783          BUS NAME:   BODY SYMMETRY MD          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:   COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
CELLULAR HEALTH, LLC                          CHAD WHITE
5977 STEWART PKWY                             5977 STEWART PKWY
DOUGLASVILLE , GA 30135                   DOUGLASVILLE , GA 30135

Ph:      (678) 689-5086                       Ph:      (833) 789-2639
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: CHAD WHITE                             Name 2:ERIC ZIEGLER
Ph:   (678) 689-5086
Email: CHAD@BODYSYMMETRYMD.COM

```

```

=====
BUS ID:      10768          BUS NAME:   SWEET SISTERS ICE CREAM & TREATS, LLC.  TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:   COMMERCIAL -- COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
SWEET SISTERS ICE CREAM & TREATS, LLC.       RONDA DARITY
5006 STEWART MILL RD                          5006 STEWART MILL RD
DOUGLASVILLE , GA 30135                   DOUGLASVILLE , GA 30135

Ph:      (678) 923-4153                       Ph:      (678) 923-4153
Fax:      (770) 693-0737                     Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: RONDA DARITY                           Name 2:JAYLIN DARITY
Ph:   (678) 923-4153
Email: RONDADARITY9756@GMAIL.COM

```

```

=====
BUS ID:      10760          BUS NAME:   BODACIOUS          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:   RESIDENTIAL -- RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
BODACIOUS                                       MONET HAYDEN
7101 STRICKLAND ST                             7101 STRICKLAND ST
Douglasville, GA 30134                       Douglasville, GA 30134

Ph:      (404) 771-4552                         Ph:      (404) 771-4552
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MONET HAYDEN                               Name 2: TELVIS BROWN
Ph:      (404) 771-4552
Email: BYM.TIERRA@YAHOO.COM

```

```

=====
BUS ID:      10786          BUS NAME:  DEAN HEALTH SOLUTIONS          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
DEAN HEALTH SOLUTIONS, LLC                     TAYLOR VAN AKEN
12461 VETERANS MEMORIAL BLVD                 37 HAYWOOD STREET
Douglasville, GA 30134                       ASHEVILLE, NC 28801

Ph:      (877) 377-2620                         Ph:
Fax:      (678) 498-2710                       Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: TAYLOR VAN AKEN                           Name 2:
Ph:      (877) 377-2620
Email: TAYLOR.DEANHEALTH@GMAIL.COM

```

```

=====
BUS ID:      10782          BUS NAME:  ET TU' FASHIONABLE ACCESSORIES FOR HIM          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
MARCUS MANUEL                                 MARCUS MANUEL
12393 VETERANS MEMORIAL HWY                 12393 VETERANS MEMORIAL HWY
Douglasville, GA 30134                       Douglasville, GA 30134

Ph:      (404) 904-2279                         Ph:      (404) 904-2279
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MARCUS MANUEL                               Name 2:
Ph:      (404) 904-2279
Email: VENROY1@GMAIL.COM

```

```

=====
BUS ID:      10780          BUS NAME:  SUPERIOR SECURITY SYSTEMS          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:
BUS TYPE:  COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

Business Address:  
-----  
MICHELLE ATKINSON  
12461 VETERANS MEMORIAL HWY SUITE 554  
Douglasville, GA 30134

Billing/Mailing Address:  
-----  
MICHELLE ATKINSON  
8491 HOSPITAL DRIVE SUITE 234  
Douglasville, GA 30134

Ph: (678) 715-1808  
Fax:  
Car-Rt:

Ph:  
Fax:  
Car-Rt:

Business Contact:  
-----  
Name: MICHELLE ATKINSON  
Ph: (678) 715-1808  
Email: MICHELLE@SUPERIORSECURITY1.COM

Name 2:

=====

|         |       |           |                          |                 |   |
|---------|-------|-----------|--------------------------|-----------------|---|
| BUS ID: | 10762 | BUS NAME: | N2DZ9 COLLABORATIVE, LLC | TOTAL LICENSES: | 1 |
|---------|-------|-----------|--------------------------|-----------------|---|

=====

BUS ADD'L:  
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS  
BUS STATUS: Active

BUSINESS INFORMATION

Business Address:  
-----  
N2DZ9 COLLABORATIVE, LLC  
6824 WOOD GATE WAY  
Douglasville, GA 30134

Billing/Mailing Address:  
-----  
N2DZ9 COLLABORATIVE, LLC  
7421 DOUGLAS BLVD.  
DOUGLASVILLE , GA 30135

Ph: (678) 427-4785  
Fax:  
Car-Rt:

Ph: (678) 427-4785  
Fax:  
Car-Rt:

Business Contact:  
-----  
Name: KYM BRYANT  
Ph: (678) 427-4785  
Email: B2GLAB@N2DZ9.COM

Name 2:

=====

|         |       |           |                 |                 |   |
|---------|-------|-----------|-----------------|-----------------|---|
| BUS ID: | 10767 | BUS NAME: | DR DRAE CUSTOMS | TOTAL LICENSES: | 1 |
|---------|-------|-----------|-----------------|-----------------|---|

=====

BUS ADD'L:  
BUS TYPE: RESIDENTIAL -- RESIDENTIAL BUSINESS  
BUS STATUS: Active

BUSINESS INFORMATION

Business Address:  
-----  
HAYES, ANDRE  
7200 WOODCREEK WAY  
Douglasville, GA 30134

Billing/Mailing Address:  
-----  
ATTN: BUSINESS OWNER  
7200 WOODCREEK WAY  
Douglasville, GA 30134

Ph: (678) 698-0535  
Fax:  
Car-Rt:

Ph: (678) 698-0535  
Fax:  
Car-Rt:

Business Contact:  
-----  
Name: ANDRE HAYES  
Ph: (678) 698-0535  
Email: DRDRAECUSTOMS@GMAIL.COM

Name 2:

-----

|           |             |    |           |    |
|-----------|-------------|----|-----------|----|
| TOTALS -- | Businesses: | 33 | Licenses: | 34 |
|-----------|-------------|----|-----------|----|