

```
=====
BUS ID:      11028      BUS NAME:  ADOLESCENT CHILD SPECIALITY SERVICES      TOTAL LICENSES:      1
=====
```

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

BUSINESS INFORMATION

```
-----
Business Address:      Billing/Mailing Address:
-----
ADOLESCENT CHILD SPECIALITY SERVICES      ADOLESCENT CHILD SPECIALITY SERVICES
5833 STEWART PKWY SUITE 203                5833 STEWART PKWY SUITE 203
DOUGLASVILLE , GA  30135                ATTN: BUSINESS OWNER
                                           DOUGLASVILLE , GA  30135

Ph:      (404) 310-1161                    Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name:  REBECCA BLAKEMAN                    Name 2:
Ph:    (404) 310-1161
Email: RBLAKEMANPHD@GMAIL.COM
```

```
=====
BUS ID:      11027      BUS NAME:  ALL WASHED UP      TOTAL LICENSES:      1
=====
```

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

BUSINESS INFORMATION

```
-----
Business Address:      Billing/Mailing Address:
-----
BJ COIN LAUNDRY, INC      BJ COIN LAUNDRY, INC
7003 CONCOURSE PKWY, SUITE A      7003 CONCOURSE PKWY, SUITE A
DOUGLASVILLE, GA  30134        ATTN: BUSINESS OWNER
                                           DOUGLASVILLE, GA  30134

Ph:      (770) 693-7824                    Ph:      (770) 693-7824
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name:  JIMMY SPRAYBERRY                    Name 2: BILLY GLYNN
Ph:    (919) 270-1308
Email: JAYSPRAYBERRY@GMAIL.COM
```

```
=====
BUS ID:      11040      BUS NAME:  ASTIN HOME CARE      TOTAL LICENSES:      1
=====
```

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

BUSINESS INFORMATION

```
-----
Business Address:      Billing/Mailing Address:
-----
THE GO GROUP, LLC      THE GO GROUP, LLC
12349 VETERANS MEMORIAL HWY      5428 SPELMAN DR. SW
DOUGLASVILLE, GA  30134        ATTN: BUSINESS OWNER
                                           ATLANTA, GA  30331

Ph:      (770) 790-0012                    Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:
```

Business Contact:

Name: MICHELE WILLIAMS
Ph: (404) 444-5836
Email: CARE@ASTINCARE.COM

Name 2:ROBERT WILLIAMS

=====
BUS ID: 11026 BUS NAME: B AND D MEDICAL TRANSPORTATION TOTAL LICENSES: 1
=====

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

BUSINESS INFORMATION

Business Address:

B AND D MEDICAL TRANSPORTATION, LLC
8687 HOSPITAL DR
DOUGLASVILLE, GA 30134

Billing/Mailing Address:

B AND D MEDICAL TRANSPORTATION, LLC
4718 TRADITION PKWY
ATTN: BUSINESS OWNER
ATLANTA, GA 30349

Ph:
Fax:
Car-Rt:

Ph:
Fax:
Car-Rt:

Business Contact:

Name: ADAM BOSITC
Ph: (678) 724-5972
Email: BANDDMEDICAL@GMAIL.COM

Name 2:JATHAN DORTCH

=====
BUS ID: 11047 BUS NAME: BEAUTIFUL CREATIONS ART GALLERY TOTAL LICENSES: 1
=====

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

BUSINESS INFORMATION

Business Address:

BEAUTIFUL CREATIONS ART GALLERY
6719 STRICKLAND ST
DOUGLASVILLE, GA 30134

Billing/Mailing Address:

BEAUTIFUL CREATIONS ART GALLERY
6719 STRICKLAND ST
ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134

Ph: (267) 770-5869
Fax:
Car-Rt:

Ph:
Fax:
Car-Rt:

Business Contact:

Name: SHAWN RUE FEIMSTER
Ph: (267) 770-5869
Email: SHAWNRAE1966@YAHOO.COM

Name 2:

=====
BUS ID: 11036 BUS NAME: BEAUTIFUL GATES FOOD TOTAL LICENSES: 1
=====

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

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
BEAUTIFUL GATES FOOD                           BEAUTIFUL GATES FOOD
8162 BROOKBEND DRIVE                           8162 BROOKBEND DRIVE
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                       DOUGLASVILLE, GA 30134

Ph: (404) 482-9640                               Ph: (470) 396-1613
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: ESTHER ADEKOYA                               Name 2:
Ph: (404) 482-9640
Email: SARAHTIMOTHY2007@GMAIL.COM

```

```

=====
BUS ID:      11038          BUS NAME:  BEYOND THRIFT          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
BEYOND THRIFT                                   BEYOND THRIFT
6410 FAIRBURN RD SUITE E                       4071 N. LAUREL GROVE RD.
                                                ATTN: FRANCES FINLEY
DOUGLASVILLE, GA 30134                       DOUGLASVILLE, GA 30134

Ph:                                              Ph:
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: FRANCES FINLEY                               Name 2: RACHEAL FINLEY
Ph: (770) 374-0813
Email: ABBRIALE@GMAIL.COM

```

```

=====
BUS ID:      11035          BUS NAME:  BUTTERS AND BLACKSOAP  TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
BUTTERS AND BLACKSOAP                           BUTTERS AND BLACKSOAP
6410 FAIRBURN RD SUITE F                       6410 FAIRBURN RD SUITE F
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                       DOUGLASVILLE, GA 30134

Ph: (678) 650-0043                               Ph:
Fax:                                              Fax:
Car-Rt:                                           Car-Rt:

Business Contact:
-----
Name: LAWRENCE STERLING                           Name 2: LISA STERLING
Ph: (678) 650-0043
Email: BUTTERSANDBLACKSOAP@GMAIL.COM

```

```

=====
BUS ID:      11022          BUS NAME:  CARIBBEAN MARKET      TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
CARIBBEAN MARKET                               CARIBBEAN MARKET
6920 DOUGLAS BLVD UNIT C                       6920 DOUGLAS BLVD UNIT C
DOUGLASVILLE, GA 30134                      ATTN: BUSINESS OWNER
                                                DOUGLASVILLE, GA 30134

Ph:      (770) 652-3826                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: AUDLEY ATKINSON                          Name 2:
Ph:      (770) 652-3826
Email: TROPICALTREATS007@GMAIL.COM

```

```

=====
BUS ID:      11044          BUS NAME:  COMMUNITY ALTERNATIVE SOLUTIONS ENTER PRISE,LLTOTAL LICENSES:          1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
ALFREDA CARTER                                 ALFREDA CARTER
8336 OFFICE PARK DRIVE, SUITE C                8336 OFFICE PARK DRIVE, SUITE C
DOUGLASVILLE, GA 30134                     DOUGLASVILLE, GA 30134

Ph:      (470) 264-1549                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: ALFREDA CARTER                          Name 2:JEFF FAUTHER
Ph:      (470) 264-1549
Email: INFO@CASECARE SERVICE.COM

```

```

=====
BUS ID:      11042          BUS NAME:  CONCIERGE AUTO SALES, LLC          TOTAL LICENSES:          1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
CONCIERGE AUTO SALES, LLC                     CONCIERGE AUTO SALES, LLC
8337 OFFICE PARK DR                           8337 OFFICE PARK DR
DOUGLASVILLE, GA 30134                     ATTN: BUSINESS OWNER
                                                DOUGLASVILLE, GA 30134

Ph:      (404) 916-4759                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: WILSON GIST                             Name 2:
Ph:      (404) 916-4759
Email: WILSONGISTCARS@GMAIL.COM

```

```

=====
BUS ID:      11030          BUS NAME:  CRAIG TRANSPORT          TOTAL LICENSES:          1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
FREDRICK CRAIG TOUCHET                         FREDRICK CRAIG TOUCHET
2549 SLATER MILL RD                            2549 SLATER MILL RD
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE , GA 30135                    DOUGLASVILLE , GA 30135

Ph:      (404) 963-3321                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: CRAIG TOUCHET                            Name 2:MARIE TOUCHET
Ph:      (404) 963-3221
Email: CRAIGTRANSPORT@YAHOO.COM

```

```

=====
BUS ID:      11020          BUS NAME:    DC SIGNS          TOTAL LICENSES:          1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
DC FABRICATION                                 DC FABRICATION
8019 DURALEE LN                               8019 DURALEE LN
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                    DOUGLASVILLE, GA 30134

Ph:      (678) 403-2833                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: DANIEL HOLLINGSWORTH                    Name 2:KIM HENDERSON
Ph:      (770) 298-2332
Email: DANIEL@DCFABPRO.COM

```

```

=====
BUS ID:      11037          BUS NAME:    DRY PROS, LLC          TOTAL LICENSES:          1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
DRY PROS, LLC                                 DRY PROS, LLC
8337 N DALLAS HWY SUITE A                    8337 N DALLAS HWY SUITE A
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                    DOUGLASVILLE, GA 30134

Ph:      (404) 437-9255                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: TJ CAMILLA                              Name 2:
Ph:      (404) 697-8388
Email: TCAMILLA@DRY-PROS.COM

```

```

=====
BUS ID:      11048          BUS NAME:    FORD LANDSCAPING          TOTAL LICENSES:          1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
FORD LANDSCAPING                               FORD LANDSCAPING
1476 CAVE SPRINGS RD                           1476 CAVE SPRINGS RD
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                       DOUGLASVILLE, GA 30134

Ph:      (770) 855-8506                         Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: TIMOTHY FORD                               Name 2:
Ph:      (770) 855-8506
Email: TFORD1600@GMAIL.COM

```

```

=====
BUS ID:      11031          BUS NAME:  GEORGIA CANCER SPECIALISTS          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
NORTHSIDE HOSPITAL, INC.                       NORTHSIDE HOSPITAL, INC.
4586 TIMBER RIDGE DR SUITE 200                 1835 SAVOY DR. SUITE 300
                                                ATTN: LICENSING DEPT.
DOUGLASVILLE , GA 30135                       ATLANTA, GA 30341

Ph:      (770) 496-9400                         Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: REBECCA DIGIOVANNI                       Name 2: LAVERNE GROVE
Ph:      (770) 496-9400
Email: REBECCA.DIGIOVANNI@GACANCER.COM

```

```

=====
BUS ID:      11029          BUS NAME:  GO C LONG, LLC          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
GO C LONG, LLC                                  GO C LONG, LLC
12461 VETERANS MEMORIAL HWY SUITE 612         12461 VETERANS MEMORIAL HWY SUITE 612
                                                ATTN: CARLOS LONG
DOUGLASVILLE, GA 30134                       DOUGLASVILLE, GA 30134

Ph:      (404) 987-8851                         Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: CARLOS LONG                               Name 2:
Ph:      (404) 987-8851
Email: CONTACT@GOCLONGLLC.COM

```

```

=====
BUS ID:      11024          BUS NAME:  HOMESTAR FINANCIAL CORPORATION          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
HOMESTAR FINANCIAL CORPORATION                 HOMESTAR FINANCIAL CORPORATION
6588 CHURCH ST                                4170 TANNERS CREEK DR.
                                                ATTN: MADDIE KNICKEL
DOUGLASVILLE, GA 30134                     FLOWERY BRANCH, GA 30542

Ph:      (470) 252-3646                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MADDIE KNICKEL                           Name 2:
Ph:      (470) 252-3646
Email: LICENSING@HOMESTARFC.COM

```

```

=====
BUS ID:      11034          BUS NAME:  LUXURY REMIXX          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
LUXURY REMIXX                                  LUXURY REMIXX
7079 LITTLEBROOK WAY                          7079 LITTLEBROOK WAY
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE, GA 30134                     DOUGLASVILLE, GA 30134

Ph:      (347) 813-3001                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: LAQUANDA LEE                             Name 2:
Ph:      (347) 813-3001
Email: LUXURYREMIXX@GMAIL.COM

```

```

=====
BUS ID:      11021          BUS NAME:  MAN ANT SERVICES, LLC          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
MAN ANT SERVICES, LLC                         MAN ANT SERVICES, LLC
7994 DAWSON LN                                7994 DAWSON LN
                                                ATTN: RANDES WELLS
DOUGLASVILLE, GA 30134                     DOUGLASVILLE, GA 30134

Ph:      (678) 338-6912                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: JOELENE WELLS                           Name 2:RANDES WELLS
Ph:      (678) 778-2884
Email: MANANTSERVICES@GMAIL.COM

```

```

=====
BUS ID:      11023          BUS NAME:  MYLEX ELECTRIC          TOTAL LICENSES:      1
=====

```

```

BUS ADD'L:  3549 BUMAR RD
BUS TYPE:  RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
MYLEX ELECTRIC                                  MYLEX ELECTRIC
3549 BUMAR RD                                  3549 BUMAR RD
                                                ATTN: JAMAL GIBBS
DOUGLASVILLE, GA 30134                    DOUGLASVILLE, GA 30134

Ph:      (678) 852-9612                        Ph:      (678) 852-9612
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: JAMAL GIBBS                               Name 2:
Ph:   (678) 852-9612
Email: MYLEXELECTRIC@YAHOO.COM

```

```

=====
BUS ID:      11032          BUS NAME:    PAINTING WITH A TWIST DOUGLASVILLE          TOTAL LICENSES:      1
=====
BUS ADD'L:
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Active

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
BROOKMAN & ASSOCIATES, LLC                     BROOKMAN & ASSOCIATES, LLC
9453 HIGHWAY 5                                  3770 LINDSY BROOK CT.
                                                ATTN: BUSINESS OWNER
DOUGLASVILLE , GA 30135                    DOUGLASVILLE , GA 30135

Ph:      (404) 922-4172                        Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: GLENNIS L. TILLMAN                       Name 2:ERIEL S. DUNNAM
Ph:   (404) 944-6093
Email: GLENNIS.TILLMAN@GMAIL.COM

```

```

=====
BUS ID:      11046          BUS NAME:    SHANE'S RIB SHACK          TOTAL LICENSES:      1
=====
BUS ADD'L: THIS IS A TEST DON'T MIND ME
BUS TYPE:    COMMERCIAL  --  COMMERCIAL BUSINESS
BUS STATUS: Terminated

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
ATTN: LICENSING ADMIN                          ATTN: LICENSING ADMIN
6695 CHURCH ST                                  6695 CHURCH ST
DOUGLASVILLE, GA 30134                    DOUGLASVILLE, GA 30134

Ph:      (678) 449-3084                        Ph:      (678) 449-3084
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: JOHN DOE                                   Name 2:
Ph:   (678) 449-3084
Email: BYRDS@DOUGLASVILLEGA.GOV

```

```

=====
BUS ID:      11045          BUS NAME:    SHERUT TAXI          TOTAL LICENSES:      1
=====
BUS ADD'L:
BUS TYPE:    RESIDENTIAL  --  RESIDENTIAL BUSINESS
BUS STATUS: Active

```


BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
SHERUT TAXI                                    SHERUT TAXI
6660 BRECKENRIDGE DRIVE                       6660 BRECKENRIDGE DRIVE
DOUGLASVILLE, GA 30134                     ATTN: BUSINESS OWNER
                                                DOUGLASVILLE, GA 30134

Ph:      (201) 925-0328                       Ph:      (201) 925-0328
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: JACQUELINE AGUILAR                       Name 2:
Ph:   (201) 925-0328
Email: JACKIEAA@GMAIL.COM

```

```

=====
BUS ID:      07563          BUS NAME:  SLIMBERRY FROZEN YOGURT   -IN          TOTAL LICENSES:      3
=====

```

```

BUS ADD'L:
BUS TYPE:  58.06  --  RETAIL-RESTAURANTS-WALK UP SERVICE
BUS STATUS: Terminated

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
6700 DOUGLAS BLVD # 1160                      C/O SERKAN NAZLI
DOUGLASVILLE, GA 30135                     6700 DOUGLAS BLVD STE 1160
                                                DOUGLASVILLE, GA 30135

Ph:      6788094184                             Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name:                                           Name 2:
Ph:   (832) 202-6633
Email:

```

```

=====
BUS ID:      11033          BUS NAME:  STRIKE FORCE GAMES          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
STRIKE FORCE GAMES                             STRIKE FORCE GAMES
7447 DOUGLAS BLVD                              7447 DOUGLAS BLVD
DOUGLASVILLE , GA 30135                     ATTN: BUSINESS OWNER
                                                DOUGLASVILLE , GA 30135

Ph:      (470) 707-2227                       Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: MARK MRAS                               Name 2:
Ph:   (470) 707-2227
Email: MARKMRAS.73@GMAIL.COM

```

```

=====
BUS ID:      11043          BUS NAME:  THE NIX AGENCY LLC          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
DAVY NIX                                       DAVY NIX
8687 HOSPITAL DR 102                          8687 HOSPITAL DR 102
DOUGLASVILLE , GA 30135                   DOUGLASVILLE , GA 30135

Ph: (678) 427-9702                            Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: DAVY NIX                                Name 2:MONIQUE NIX
Ph: (678) 427-9702
Email: DAVYNIX@ALLSTATE.COM

```

```

=====
BUS ID:      11041          BUS NAME:    THE SPRING HOUSE AT LITHIA SPRINGS          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
LITHIA SENIOR LIVING, LLC                     LITHIA SENIOR LIVING, LLC
950 BOB ARNOLD BLVD                          950 BOB ARNOLD BLVD
LITHIA SPRINGS, GA 30122                    ATTN: BUSINESS OWNER
                                              LITHIA SPRINGS, GA 30122

Ph: (770) 883-8955                            Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: DENNIS STAMEY-LUCAS                     Name 2:TAMMY COCHRAN
Ph: (404) 931-6807
Email: DAS@CANOPYLIFESTYLES.COM

```

```

=====
BUS ID:      11039          BUS NAME:    THE UPS STORE          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

```

-----
Business Address:                               Billing/Mailing Address:
-----
JAYCOM, LLC                                   JAYCOM, LLC
618 THORNTON RD                              1122 POPLAR LOG PL.
LITHIA SPRINGS, GA 30122                    ATTN: BUSINESS OWNER
                                              AUSTELL, GA 30168

Ph: (770) 771-2785                            Ph:
Fax:                                           Fax:
Car-Rt:                                       Car-Rt:

Business Contact:
-----
Name: JASON KAUFFMANN                         Name 2:
Ph: (770) 771-2785
Email: JASONKAUFFMANN@GMAIL.COM

```

```

=====
BUS ID:      11025          BUS NAME:    ZION RECYCLE INDUSTRIES          TOTAL LICENSES:      1
=====

```

```

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

```

BUSINESS INFORMATION

Business Address:

ZION RECYCLE INDUSTRIES
12311 VETERANS MEMORIAL HWY

DOUGLASVILLE, GA 30134

Ph: (470) 456-7732
Fax:
Car-Rt:

Business Contact:

Name: RICHARD DUNCAN
Ph: (470) 456-7732
Email: DZRICHARDSON1000@GMAIL.COM

Billing/Mailing Address:

ZION RECYCLE INDUSTRIES
12311 VETERANS MEMORIAL HWY
ATTN: RICHARD DUNCAN
DOUGLASVILLE, GA 30134

Ph:
Fax:
Car-Rt:

Name 2:

TOTALS -- Businesses: 30 Licenses: 32