F1900000130

(Re	questor's Name)	<u></u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300253533733

01/06/14--01043--007 **70.00

SECNETARY OF STATE

Western Express, Inc.

Legal Department 7135 Centennial Place Nashville, TN 37209

Ron Lowell

Phone: (615) 259-9920

rlowell@westernexp.com Facsimile: (615) 346-1557

December 19, 2013

New Filing Section Florida Division of Corporations PO Box 6327 Tallahassee, FL 32314

To Whom It May Concern,

Please find enclosed New Horizon Leasing's completed application to transact business, as well a check to cover the \$70 filing fee. Please let me know if I can be of any further assistance.

Very truly yours,

Ron Lowell

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: New Horizons Leas	sing, Inc.
	poration - must include suffix
Dear Sir or Madam:	
	tion for Authorization to Transact Business in Florida," good Standing" and check are submitted to register the at business in Florida.
Please return all correspondence concerning thi	s matter to the following:
Roland Lowell	
N	ame of Person
New Horizons Leasing, Inc.	
Fi	rm/Company
7135 Centennial Place	
	Address
Nashville, TN 37209	
City	/State and Zip code
rlowell@westernexp.com	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter,	please call:
Roland Lowell at 6	Area Code & Daytime Telephone Number
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
■ \$70.00 Filing Fee ☐ \$78.75 Filing Fee a	

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.

	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	' "COMPANY," "CORPORAT	ION,"
(If name unavail	able in Florida, enter alternate corporate na	ıme	adopted for the purpose of transa	cting business in Florida)
lowa		3	42-1491621	
(State or country	under the law of which it is incorporated)	''	(FEI number, if a	applicable)
05/27/19	99	5.	perpetual	
	of incorporation)	, , , ,	(Duration: Year corp. will ceas	e to exist or "perpetual")
2039 Qua	il Ave. Ft. Dodge, IA 50			
2039 Qua	(Current mailing	add	ress)	
	(Principal office (Current mailing	add	ress)	TAG -1
Equipme	(Principal office (Current mailing	add	ress)	Flori (F) C
Equipme (Purpose(s	(Principal office (Current mailing	add add	ress) ress) nuntry to be carried out in state of	Flori POCINE TAN -
Equipme (Purpose(s	(Principal office (Current mailing nt Leasing s) of corporation authorized in home state of	add add	ress) ress) nuntry to be carried out in state of	JAN -6 NHASSE
Equipme (Purpose(s) Name and street Name:	(Principal office (Current mailing nt Leasing s) of corporation authorized in home state of the state of t	add add	ress) ress) nuntry to be carried out in state of	JAN-6
Equipme (Purpose(s	(Principal office (Current mailing nt Leasing a) of corporation authorized in home state of address of Florida registered agent: Christopher Barkas	add add	ress) ress) nuntry to be carried out in state of	JAN -6 AH

10. Registered agent's acceptance:

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.

Cluty Balkas
(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: Paul Wieck 7135 Centennial Place Nashville, TN 37209 Vice Chairman: Richard Prickett, Jr. 7135 Centennial Place Address: Nashville, TN 37209 B. OFFICERS Paul Wieck 7135 Centennial Place Nashville, TN 37209 Vice President: Address: Roland Lowell 7135 Centennial Place Nashville, TN 37209 Richard Prickett, Jr. Treasurer: 7135 Centennial PLace Nashville, TN 37209 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. /s/ Roland Lowell ignature 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.

Roland Lowell, Secretary

IOWA SECRETARY OF STATE MATT SCHULTZ



CERTIFICATE OF EXISTENCE

Date: 11/26/2013

Name: NEW HORIZONS LEASING, INC. (490 DP - 228828)

Date of Incorporation: 5/27/1999

Duration: PERPETUAL

- I, Matt Schultz, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:
 - a. The entity is in existence and duly incorporated under the laws of Iowa.
 - b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
 - c. The most recent biennial report required has been filed with the Secretary of State.
 - d. Articles of dissolution have not been filed.

14 JAN -6 AH 7: 48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Certificate ID: CS86451

To validate certificates visit:

sos.iowa.gov/ValidateCertificate

Matt Schultz, Iowa Secretary of State