

F14000003218  
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**Florida Department of State**  
**Division of Corporations**  
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**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**Denard Consolidated, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

14 JUL 30 PM 12:57

APPROVED  
 AND  
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APPROVED  
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

SECRETARY OF STATE  
TALLAHASSEE, 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.

1. **Denard Consolidated, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co." or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **North Carolina**

(State or country under the law of which it is incorporated)

3. **46-3607771**

(FEI number, if applicable)

4. **09-10-2013**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability)

7. **2028 Cross Beam Dr. - Charlotte, NC 28217**

(Principal office address)

**P O Box 19707 - Charlotte, NC 28219**

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **Bernice S. Saxon, Esq.**

Office Address: **201 E. Kennedy Blvd., Suite 600**

**Tampa**, Florida **33602**  
(City) (Zip code)

9. 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.*

  
(Registered agent's signature)

10. 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.

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11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: Frank Johnson

Address: 2028 Cross Beam Dr. - Charlotte, NC 28217  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: Frank Johnson

Address: 2028 Cross Beam Dr. - Charlotte, NC 28217  
\_\_\_\_\_

Vice President: Johnny C Taylor

Address: 2028 Cross Beam Dr. - Charlotte, NC 28217  
\_\_\_\_\_

Secretary: Frank Johnson

Address: 2028 Cross Beam Dr. - Charlotte, NC 28217  
\_\_\_\_\_

Treasurer: Frank Johnson

Address: 2028 Cross Beam Dr. - Charlotte, NC 28217  
\_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

Signature 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.

13. Frank Johnson - President

(Typed or printed name and capacity of person signing application)

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AND  
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# NORTH CAROLINA Department of the Secretary of State

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SECRETARY OF STATE  
TALLAPOSEE COUNTY

## CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### DENARD CONSOLIDATED INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 6th day of September, 2013, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 28th day of July, 2014.



Scan to verify online.

*Elaine F. Marshall*

Secretary of State

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