

F15000004669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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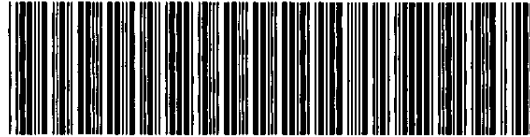
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/15/15--01021--003 **87.50

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TALLAHASSEE, FLORIDA

OCT 22 2015

J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FACILITY SERVICES MANAGEMENT INC

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

TIM GRAY

Name of Person

FACILITY SERVICES MANAGEMENT INC

Firm/Company

1031 PROGRESS DRIVE

Address

CLARKSVILLE, TN 37040

City/State and Zip code

TGRAY@FACSVCS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TIM GRAY

931 552-7044
at ()

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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 & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & 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.*

FACILITY SERVICES MANAGEMENT, INC.

1.

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

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

2.

TN

61-1265365

3.

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

(FEI number, if applicable)

4.

11/10/2003

5.

(Date of incorporation)

(Date of duration, if other than perpetual)

6.

10/01/2015

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

7.

3250 ZEMKE AVE, 6TH MEDICAL SUPPORT SQUADRON, ROOM 1J26, MACDILL AFB, FL 33621

(Principal office address)

1031 PROGRESS DRIVE, CLARKSVILLE, TN 37040

(Current mailing address, if different)

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

Name:

Corporation Service Company

Office Address:

1201 Hays Street

Tallahassee

, Florida 32301

(City)

(Zip code)

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TALLAHASSEE, FLORIDA

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.

Holly Jones
Assistant Vice President

Holly Jones

(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: CAROLYN HAMBY

Address: 1031 PROGRESS DRIVE

CLARKSVILLE, TN 37040

Vice President: JILL WORKMAN

Address: 1031 PROGRESS DRIVE

CLARKSVILLE, TN 37040

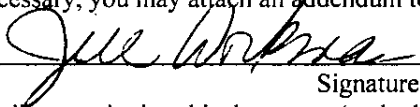
Secretary: MARTHA PRESLEY

Address: 1031 PROGRESS DRIVE CLARKSVILLE, TN 37040

Treasurer: MICHAEL PRESLEY

Address: 1031 PROGRESS DRIVE CLARKSVILLE, TN 37040

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

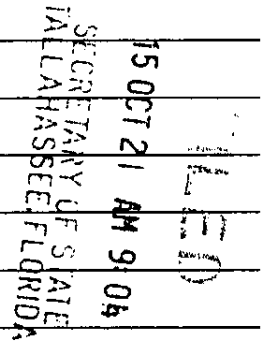
12.  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. JILL WORKMAN/ VP

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





STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

TIM GRAY
1031 PROGRESS DRIVE
CLARKSVILLE, TN 37040

October 14, 2015

Request Type: Certificate of Existence/Authorization
Request #: 0178158

Issuance Date: 10/14/2015
Copies Requested: 1

Document Receipt

Receipt #: 002272771

Filing Fee: \$22.25

Payment-Credit Card - State Payment Center - CC #: 165309377

\$22.25

Regarding: FACILITY SERVICES MANAGEMENT, INC.

Filing Type: For-profit Corporation - Domestic

Control #: 457194

Formation/Qualification Date: 11/10/2003

Date Formed: 11/10/2003

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: MONTGOMERY COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

FACILITY SERVICES MANAGEMENT, INC.

* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

* has filed the most recent annual report required with this office;

* has appointed a registered agent and registered office in this State;

* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

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