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Florida Department of State
Division of Corporations
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To: Division of Corporations
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16 SEP 20 AM 10:59
EFILE

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FOREIGN PROFIT/NONPROFIT CORPORATION
MAINNERVE FEDERAL SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

2016 SEP 20 PM 4:43
DIVISION OF CORPORATIONS

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.

1. Main Nerve Federal Services, Inc
(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. Delaware (State or country under the law of which it is incorporated)
3. 27-1644249 (FE number, if applicable)
4. 1/08/2010 (Date of incorporation)
5. _____ (Date of duration, if other than perpetual)

6. Expect to begin work on/about September 22, 2016
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8647 Bayonne Road # 330, Jacksonville, FL 32236 (Principal office address)
1252 Chloe Dr Gallatin, TN 37066 (Current mailing address, if different)

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

Name: NRAI Services, Inc
Office Address: 1200 South Pine Island RD
Plantation, Florida 33324
(City) (Zip code)

16 SEP 20 AM 13:28
REGISTERED 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.

Michael Doms
(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 & address of Directors and Officers

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: George M Tronstue III

Address: 1252 Chloe Dr Gallatin, TN 37066

Director: Cindy L Tronstue

Address: 1252 Chloe Dr. Gallatin, TN 37066

B. OFFICERS

President: George M Tronstue III

Address: 1252 Chloe Drive, Gallatin, TN, 37066

Vice President: Evan M Bailey

Address: 1057 Baxter Drive Gallatin, TN 37066

Secretary: George M Tronstue III

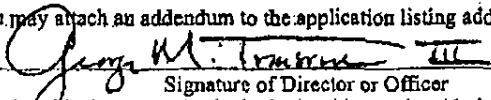
Address: same as above

Treasurer: George M Tronstue III

Address: same as above

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, P.S.

13. George M Tronstue III

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

16 SEP 20 AM 9:23
DEPARTMENT OF REVENUE
NASHVILLE, TN 37243

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MAINNERVE FEDERAL SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF JULY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



4775227 8300

SR# 20164913664

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line.

Authentication: 202658764

Date: 07-14-16