

F23000006536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

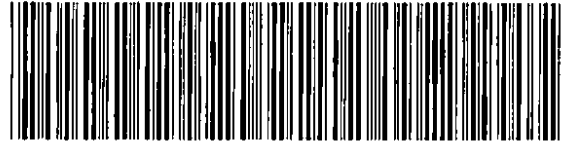
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023 NOV 20 PM 3:03

APPROVED
AND
FILED

2023 NOV 20 PM 5:45

NOV 20 2023

K. Brumbley

AS

M. MORT SWAIM, P.C.

LAW OFFICES

235 West Laurel Avenue ❖ Foley, Alabama 36535-1918
(251) 943-3999 ❖ Facsimile (251) 943-3137 ❖ E-mail: swaimlaw@gulftel.com

November 17, 2023

Kyle Brumbley
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303

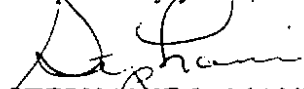
Via Federal Express

Re: Benson's Appliance Center, Inc.

Dear Mr. Brumbley:

As discussed in your email exchange with Mr. Swaim today, please find enclosed our firm check no. 6888 in the amount of \$87.50 for the Application by Foreign Corporation for Authorization to Transact Business in Florida and Certificate of Existence that we submitted on behalf of our client Benson's Appliance Center, Inc. on October 17th, along with a copy of the email correspondence. If you have any questions or require more information, please feel free to contact us. Have a very pleasant day.

Respectfully yours,


STEPHANIE L. MANNING
Legal Assistant for the Firm

/slm

Enclosures as noted

cc: Charles W. Squires, IV (w/ encl.)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Benson's Appliance Center, 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:

Mort Swain

Name of Person

M. Mort Swain, P.C.

Firm/Company

235 West Laurel Avenue

Address

Foley, Alabama 36535-1918

City/State and Zip code

swainrlaw@gulfnet.com

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

For further information concerning this matter, please call:

Mort Swain

at (251) 943-3999

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$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.

1. Benson's Appliance Center, 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. Alabama _____ 3. 63-0715344
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. October 1, 1976 _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 501 North McKenzie Street / Foley, Alabama 36535

(Principal office street address)

(Current mailing address, if different)

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

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation _____ Florida 33324
(City) (Zip code)

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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.

Nichol McCroy _____ Nichol McCroy, Assistant Secretary
(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Charles W. Squires, IV
 Vice Chairman Address: 27475 County Road 20
 Director Elberta, Alabama 36530
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Chairman Name: Summer L. Squires
 Vice Chairman Address: 27475 County Road 20
 Director Elberta, Alabama 36530
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

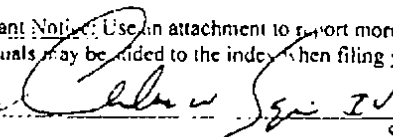
Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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. CHARLES W. SQUIRES, IV
(Typed or printed name and capacity of person signing application)

Wes Allen
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Wes Allen, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Benson's Appliance Center, Inc. was formed in Baldwin County on October 1, 1976. The Alabama Entity Identification number for this entity is 000-043-261. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.



09/22/2023

Date

Handwritten signature of Wes Allen in black ink.

20230922000006614

Wes Allen

Secretary of State