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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Cole LAW GLOUP PC
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:  Name of Person
Name of Person  Code LAW Group PC
750 Old Hickory Blud, Ste 2-202
Brentword TN 37027  City/State and Zip code  **Ecole @ cole   alughoup PC, Com  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (6/5) 490-60 Zo  Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:  MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	>
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Corp," "Inc," "Co," or "Corp.")	- (
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
(State or country under the law of which it is incorporated)  (FEI number, if applicable)	
(Date of incorporation)  5.   (Duration: Year corp. will cease to exist or "perpetual")	
(Date of incorporation) (Duration: Year cosp. will cease to exist or "perpetual")	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	a.
261 5. Mouroe St., Suite 300, Tallahussee 3	4C 1230 <sub>1</sub>
750 Och Hickory Plus, Sucke 2-200, Breatwood TN 376 (Current mailing address)	627
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Solution Solutio	er er
ffice Address: 201 S. Monroe Sty Suite 300  TAllahalice, Florida 3230 (Zip code)	Andrews Sales
Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the place essignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. There agree to comply with the provisions of all statutes relative to the proper and complete performance of my Ities, and I am familiar with and accept the obligations of my position as registered agent.	
Robbelle	
(Registered agent's signature)	
<ol> <li>Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application in</li> </ol>	io

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: Address: Director: Address: \_\_ **B. OFFICERS** President: Todd G. Cole

Address: 750 Old Hickory Blub, Ste 2-202, Brentwood, TN 37027 Vice President: Address: Secretary: Theodore Wills Address: 750 Old Hickory Blud, Ste 2-202, Brentwood, TN Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Todd & Cole President



### 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

**KEVIN HICKMAN** 

**SUITE 103** 3803 BEDFORD AVENUE NASHVILLE, TN 37215

Request Type: Certificate of Existence/Authorization

Request #:

0158534

Issuance Date: 04/07/2015

Copies Requested:

**Document Receipt** 

Receipt #: 001987239

Payment-Credit Card - State Payment Center - CC #: 161709268

Filing Fee:

\$22.25 \$22.25

April 7, 2015

Regarding:

Cole Law Group, P.C.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 08/29/2014

Status:

Active

Duration Term:

Perpetual

**Business County: WILLIAMSON COUNTY** 

Control #:

769995

Date Formed:

08/29/2014

Formation Locale: TENNESSEE

Inactive Date:

#### **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

#### Cole Law Group, P.C.

- \* 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.

Secretary of

State Verification #: 011379934

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