

F03000001597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

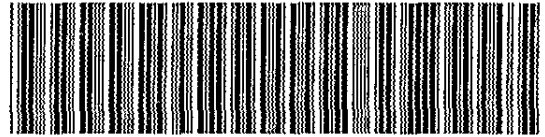
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700014855837

FILED
03 MAR 31 AM 10:25
STATE
TALLAHASSEE, FLORIDA

03/31/03--01056--023 **78.75

3K



BOULT ■ CUMMINGS
CONNERS ■ BERRY PLC

D. Lynn Finley
(615) 252-3525
Fax: (615) 248-3037
Email: lfinley@boulcumplings.com

FILED
MAR 31 AM 10:25
TALLAHASSEE, FLORIDA

March 28, 2003

VIA FEDERAL EXPRESS

Florida Department of State
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

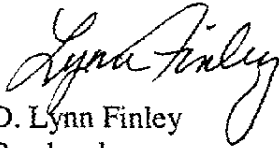
Re: City Nights Valet of Tennessee, Inc.

Dear Sir or Madam:

Enclosed please find an original and one copy of an Application by Foreign Corporation for Authorization to Transact Business in Florida for City Nights Valet of Tennessee, to be filed with the Division of Corporations. Also enclosed are a certificate of existence from the Tennessee Secretary of State and a check in the amount of \$78.75 in payment of the following fees: \$70 filing fee and \$8.75 certified copy.

Please return your letter of acknowledgement and the certified copy of the Application to the undersigned. A postage paid return envelope has been provided for your convenience. Please contact me if you have any questions. Thank you for your assistance.

Very truly yours,


D. Lynn Finley
Paralegal

enclosures

cc: Christopher A. Sloan, Esq. (w/encl)

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: City Nights Valet of Tennessee, Inc.
(Name of corporation - must include suffix)

FILED
03 MAR 31 AM 10:25
STATE
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

D. Lynn Finley

(Name of Person)

Boult, Cummings, Conners & Berry, PLC

(Firm/Company)

414 Union Street, Suite 1600

(Address)

Nashville, TN 37219

(City/State and Zip code)

For further information concerning this matter, please call:

D. Lynn Finley

(Name of Person)

at (615) 252-3525

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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

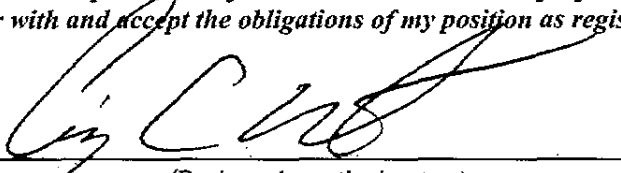
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

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.

1. City Nights Valet of Tennessee, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Tennessee 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 24, 2003 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 621 E. Washington Street, #8, Orlando, Florida 32801
(Principal office address)
621 E. Washington Street, #8, Orlando, Florida 32801
(Current mailing address)
8. valet parking
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: Craig C. Mateer
Office Address: 621 E. Washington Street, #8
Orlando, Florida 32801
(City) (Zip code)

10. 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)

11. 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.

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

A. DIRECTORS

Chairman: Craig C. Mateer

Address: 621 E. Washington Street, #8, Orlando, Florida 32801

Vice Chairman: _____

Address: _____

Director: Craig C. Mateer

Address: 621 E. Washington Street, #8, Orlando, Florida 32801

Director: _____

Address: _____

B. OFFICERS

President: Craig C. Mateer

Address: 621 E. Washington Street, #8, Orlando, Florida 32801

Vice President: _____

Address: _____

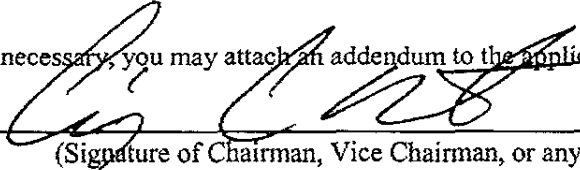
Secretary: Craig C. Mateer

Address: 621 E. Washington Street, #8, Orlando, Florida 32801

Treasurer: _____

Address: _____

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Craig C. Mateer, President

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

FILED
03 MAR 31 AM 10:25
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 03/24/2003
REQUEST NUMBER: 03083164
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 03/24/2003
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0443999
JURISDICTION: TENNESSEE

TO:
BOULT CUMMINGS CONNERS & BERRY
D. LYNN FINLEY
414 UNION STREET
NASHVILLE, TN 37219

REQUESTED BY:
BOULT CUMMINGS CONNERS & BERRY
D. LYNN FINLEY
414 UNION STREET
NASHVILLE, TN 37219

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
"CITY NIGHTS VALET OF TENNESSEE, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE
INCORPORATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FILED
03 MAR 31 AM 10:25
RECEIVED
SECRETARY OF STATE
NASHVILLE, TENNESSEE, FLORIDA

FOR: REQUEST FOR CERTIFICATE

ON DATE: 03/24/03

FROM:
BOULT CUMMINGS CONNERS & BERRY/PO 198062
P. O. BOX 198062
NASHVILLE, TN 37219-0000

RECEIVED:	FEES \$20.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$20.00
RECEIPT NUMBER:		00003246420
ACCOUNT NUMBER:		00000413



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE