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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

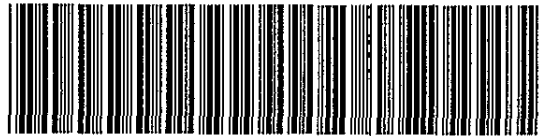
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04 DEC -1 PM 5:15  
TALLAHASSEE, FLORIDA

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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DIXON SERVICES, 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," 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:

CHARLES R. DIXON

(Name of Person)

DIXON SERVICES, INC.

(Firm/Company)

1594 TWO PLACE, MEMPHIS, TN 38116

(Address)

MEMPHIS, TN 38116

(City/State and Zip code)

For further information concerning this matter, please call:

CHARLES R. DIXON

(Name of Person)

at ( 901 ) 345-6608

(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

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dixon Services Inc. of Florida  
(Name of corporation - must include suffix)

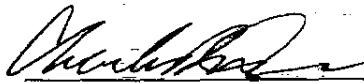
Dear Sir or Madam:

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

Charles R. Dixon  
(Name of Person)  
Dixon Services Inc. of Florida  
(Firm/Company)  
1594 Two Place  
(Address)  
Memphis, TN. 38116  
(City/State and Zip code)

For further information concerning this matter, please call:

 at 901 , 345-6608  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
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P.O. Box 6327  
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- ☒ \$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. DIXON 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. TENNESSEE, USA 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 2/11/2000 5. \_\_\_\_\_  
(Date of incorporation) (Duration: Year corp. will cease to exist or "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. 1594 TWO PLACE, MEMPHIS, TN 38116  
(Principal office address)  
1594 TWO PLACE, MEMPHIS, TN 38116  
(Current mailing address)
8. HOME REPAIR (ROOFING)  
(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 NOT acceptable)  
Name: Business Filings Incorporated  
Office Address: 660 East Jefferson Str.  
Tallahassee, FL Florida 32301  
(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.

Mark Schiff  
(Registered agent's signature)

Mark Schiff, AVP Business Filings  
Incorporated

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:

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TALLAHASSEE, FLORIDA

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_**B. OFFICERS**President: MARY P. DIXONAddress: 4489 BILLY MAHER ROADMEMPHIS, TN 38135


Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_Secretary: CHARLES R. DIXONAddress: 4489 BILLY MAHER ROAD, MEMPHIS, TN 38135

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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

13.   
(Signature of Director or Officer listed in number 12 of the application)14. CHARLES R. DIXON, SECRETARY  
(Typed or printed name and capacity of person signing application)

**AFFIDAVIT OF ROOFING COMPETENCY**

I, Allen R. Medlock, certify that I have direct knowledge of the  
(PRINT NAME OF PERSON CERTIFYING EXPERIENCE)

work experience of Dixon Services, and that he or she has satisfactorily  
(PRINT APPLICANT'S NAME)

performed roofing work with wood shakes, or asphalt or fiberglass shingles.

Notarized Signature of Person Certifying Experience: Allen R. Medlock

Position: Building Official

Name of Building Department: Memphis & Shelby Co. Construction Code Enforcement

Date: 10-6-2004

Address: 6465 Mullins Station Rd.

City/State/Zip: Memphis, TN. 38134

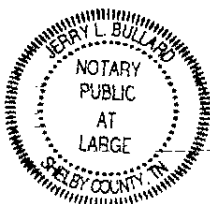
Phone No.: 901-379-4207

E-mail (optional): MEDLOCK-2@CO.SHELBY.TN.US

Allen R. Medlock

STATE OF Shelby COUNTY OF TN. Before me  
personally appeared the person named above, known to me to be the person described in and  
who executed the foregoing instrument and acknowledged to and before me that executed  
said instrument for the purposes therein expressed.

Notary Signature and Stamp/Seal



MY COMMISSION EXPIRES:  
December 29, 2004

Jerry L. Bullard  
10/6/04

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

ISSUANCE DATE: 11/24/2004  
REQUEST NUMBER: 04329566  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 02/11/2000  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0384493  
JURISDICTION: TENNESSEE

TO:  
JENNIFER SMOTHERS  
312 8TH AVE N  
NASHVILLE, TN 37243

REQUESTED BY:  
JENNIFER SMOTHERS  
312 8TH AVE N  
NASHVILLE, TN 37243

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

-----  
"DIXON SERVICES, INC."  
-----

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF  
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 THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED  
WITH THIS OFFICE; AND  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

-----  
FOR: REQUEST FOR CERTIFICATE

ON DATE:

FROM:

RECEIVED:	FEES \$0.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$0.00
RECEIPT NUMBER:		
ACCOUNT NUMBER:		



*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE