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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

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05 APR 27 AM 7:55

DIVISION OF CORPORATION

FOREIGN PROFIT QUALIFICATION

FirstSource Facility Services, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

05 APR 27 2005
TALLAHASSEE, FLORIDA

05 APR 27 2005

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**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. FirstSource Facility 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 3. 14-1906732
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. 04/27/2004 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 05/01/2005
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 7135 Charlotte Pike, Suite 100, Nashville, TN 37209
(Principal office address)
same
(Current mailing address)
8. Tenant building outs and remodeling, commercial landscaping.
(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: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.
C T Corporation System
By: [Signature] Jennifer F. Aultman
(Registered agent's signature) Assistant Secretary
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:

05 APR 27 AM 11:18
TALLAHASSEE, FLORIDA

A. DIRECTORS *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Keith Gerald WolkenAddress: 7135 Charlotte Pike, Suite 100Nashville, TN 37209Director: Gerald WolkenAddress: 7135 Charlotte Pike, Suite 100Nashville, TN 37209**B. OFFICERS** *SEE ATTACHMENT*President: Keith Gerald WolkenAddress: 7135 Charlotte Pike, Suite 100Nashville, TN 37209

Vice President: _____

Address: _____

Secretary: Hiram CoxAddress: 7135 Charlotte Pike, Suite 100 Nashville, TN 37209Treasurer: Hiram CoxAddress: 7135 Charlotte Pike, Suite 100 Nashville, TN 37209**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. Hiram Cox, Secretary

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

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TALLAHASSEE, FLORIDA

Attachment to Florida

Officers & Directors

-
- | | | |
|----|-------------------|--------------------------------|
| 1. | Full Name: | Keith Gerald Wolken |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | President |
| | Director's Title: | Other Director |
| | Business Address: | 7135 Charlotte Pike, Suite 100 |
| | City: | Nashville |
| | State: | TN |
| | ZIP Code: | 37209 |
| 2. | Full Name: | Hiram Cox |
| | Officer/Director: | Officer |
| | Officer's Title: | Sec/Treas |
| | Business Address: | 7135 Charlotte Pike, Suite 100 |
| | City: | Nashville |
| | State: | TN |
| | ZIP Code: | 37209 |
| 3. | Full Name: | Thomas Riley |
| | Officer/Director: | Director |
| | Officer's Title: | |
| | Director's Title: | Other Director |
| | Business Address: | 7135 Charlotte Pike, Suite 100 |
| | City: | Nashville |
| | State: | TN |
| | ZIP Code: | 37209 |
| 4. | Full Name: | Patrick Burke |
| | Officer/Director: | Director |
| | Officer's Title: | |
| | Director's Title: | Other Director |
| | Business Address: | 7135 Charlotte Pike, Suite 100 |
| | City: | Nashville |
| | State: | TN |
| | ZIP Code: | 37209 |

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TALLAHASSEE, FLORIDA

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12:47

C T Atlanta team 3

CTCORPORATIONSYSTEM

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

REQUEST NUMBER: 05111129
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 04/27/2004
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0468485
JURISDICTION: TENNESSEE

TO:
CPS
8161 HIGHWAY 100
#172
NASHVILLE, TN 37221

REQUESTED BY:
CPS
8161 HIGHWAY 100
#172
NASHVILLE, TN 37221

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
"FIRSTSOURCE FACILITY 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: 04/21/05

FROM:
CPS
8161 HIGHWAY 100
#172
NASHVILLE, TN 37221-0000

RECEIVED: FEES \$120.00 \$0.00
TOTAL PAYMENT RECEIVED: \$120.00
RECEIPT NUMBER: 00003710350
ACCOUNT NUMBER: 00101230



Riley C. Darnell

RILEY C. DARNELL
SECRETARY OF STATE