

# F1200003373

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

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DIVISION OF CORPORATIONS  
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## FOREIGN PROFIT/NONPROFIT CORPORATION TOTAL MAINTENANCE MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** Total Maintenance Management, 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:**

Name of Person	Address	City	State	Zip
Karen Bass				

SMS Holding	Firm/Company
-------------	--------------

7135 Charlotte Pike Suite #100  
Address

Nashville, TN 37209

kbass@smsholdings.com  
E-mail address: (to be used for future annual report notification)

**For further information concerning this matter, please call:**

Name of Person \_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

**New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301**

**MAILING ADDRESS:**

**New Filing 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

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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. Total Maintenance Management, 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. 62-1533613  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/11/1993 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification  
(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. Provide Maintenance/Management for commercial customers  
(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]  
(Registered agent's signature)

Nathan S. Griffin Asst. 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.

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

A. DIRECTORS *SEE ATTACHMENT*

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

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

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

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

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

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

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

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

B. OFFICERS

President: Gerald L. Wolken

Address: 7135 Charlotte Pike, Suite 100

Nashville, TN 37209

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

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

Secretary: Hiram A. Cox

Address: 7135 Charlotte Pike, Suite 100, Nashville, TN 37209

Treasurer: Hiram A. Cox

Address: 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

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.

14. Hiram A. Cox, Secretary

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

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**Attachment to Florida  
Officers & Directors**

1	Full Name:	Gerald L. Wolken
	Officer/Director:	Officer, Director
	Officer's Title:	President/Director
	Director's Title:	Director
	Business Address:	7135 Charlotte Pike, Suite 100
	City:	Nashville
	State:	TN
	ZIP Code:	37209
2	Full Name:	Patrick J. Burke
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	7135 Charlotte Pike, Suite 100
	City:	Nashville
	State:	TN
	ZIP Code:	37209
3	Full Name:	Thomas P. Riley, Jr.
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	7135 Charlotte Pike, Suite 100
	City:	Nashville
	State:	TN
	ZIP Code:	37209



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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

**CT CORPORATION**  
2390 E CAMELBACK ROAD  
PHOENIX, AZ 85016

August 13, 2012

Request Type: Certificate of Existence/Authorization  
Request #: 0073860

Issuance Date: 08/13/2012  
Copies Requested: 1

**Document Receipt**

Receipt #: 807228

Filing Fee: \$22.25

Payment-Credit Card - TennesseeAnytime Online Payment #: 146560491

\$22.25

Regarding: **TOTAL MAINTENANCE MANAGEMENT, INC.**

Filing Type: Corporation For-Profit - Domestic

Control #: 265753

Formation/Qualification Date: 05/11/1993

Date Formed: 05/11/1993

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: DAVIDSON COUNTY

**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

**TOTAL MAINTENANCE MANAGEMENT, INC.**

\* 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 corporation 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.

Tre Hargett  
Secretary of State

Processed By: Cert Web User

Verification #: 001453323

Phone 615-741-6488 \* Fax (615) 741-7310 \* Website: <http://tnbear.tn.gov/>