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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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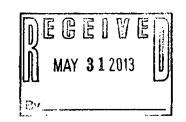
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## **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: MID SOUTH BUSINESS 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," 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:		
SANICE KNIGHT		
Name of Person		
MID SOUTH BUSINESS SERVICES, INC		
Firm/Company		
689-B TOWNE CENTER BLUD		
Address		
RIDGELAND MS 39157		
City/State and Zip code  Mai Opp   Pase   Om    E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
JANICE LNIGHT at (601) 987-3025		
Name of Person 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 \$\Bigcup \text{\$78.75 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \text{\$78.75 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy}\$\$\$		





### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 22, 2013

JANICE KNIGHT MID SOUTH BUSINESS SERVICES, INC. 689-B TOWNE CENTER BLVD RIDGELAND, MS 39157

SUBJECT: MID-SOUTH BUSINESS SERVICES, INC.

Ref. Number: W13000029838

We have received your document for MID-SOUTH BUSINESS SERVICES, INC. and your check(s) totaling \$687.50. However, the document has not been filed and is being retained in this office for the following:

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$950.00.

There is a balance due of \$350.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Diane Cushing Regulatory Specialist II Supervisor

Letter Number: 613A00012871

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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. (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) (State or country under the law of which it is incorporated) (Duration: Year corp. 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) DGELAND. (Current mailing address) (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: Office Address: \_\_\_\_, Florida \_\_**333**\_\_ 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.

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.

Registered agent's signature)

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

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	₩
President: LARRY L LEWIS	음을 <b>교</b> 당원 <b>교</b>
Address: 689- B TOWNE CENTER BLYT	
RIDGELAND MS 39157	
Vice President:	S   S   S   S   S   S   S   S   S   S
Address:	중류 <b>교</b>
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing a	dditional officers and/or directors.
13	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 a	hove) affirms that the facts stated herein
are true and that he or she is aware that false information submitted in a docum	ent to the Department of State constitutes
a third degree felony as provided for in s.817.155, F.S.  APPLIA LEWIS PRESIDENT	Mand X Xum
14. LHEY L WEWIS, TRESIDENT	archichtion /

## State of Mississippi

Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

#### CERTIFICATE

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on March 31, 1977, the State of Mississippi issued a Charter/Certificate of Authority to:

MID-SOUTH BUSINESS SERVICES, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand and seal of office June 7, 2013

C. Delbert Hosemann, Jr.
Secretary of State

Certification Number: 13029710-1 Page 1 of 1 Reference: Matt Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp