

# F/4000002061

Division of Corporations  
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## To:

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

## From:

Account Name : BUSINESS FILINGS  
Account Number : 105256001620  
Phone : (608) 827-5300  
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## FOREIGN PROFIT/NONPROFIT CORPORATION

Vertek Solutions, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

*05/12/14*

RECEIVED  
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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H14000115223

**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**

Vertek Solutions, Inc.

1. Vertek Solutions, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Int.," "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. 20-5345709  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8/4/2006 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. 725 Cool Springs Blvd Suite 240, Franklin, Tennessee 37067  
(Principal office address)  
725 Cool Springs Blvd Suite 240, Franklin, Tennessee 37067  
(Current mailing address)

8. All lawful business  
(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: 515 E. Park Avenue  
Tallahassee 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 Williams Mark Williams, AVP, Business Filings Incorporated

(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.

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

A. DIRECTORS

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

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

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

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

Director: Brian Murphy

Address: 101 Forrest Crossing Blvd Suite 107, Franklin, Tennessee 37064

Director: Michael Murphy

Address: 101 Forrest Crossing Blvd Suite 107, Franklin, Tennessee 37064

B. OFFICERS

President: Brian Murphy

Address: 101 Forrest Crossing Blvd Suite 107, Franklin, Tennessee 37064

Vice President: Brian Murphy

Address: 101 Forrest Crossing Blvd Suite 107, Franklin, Tennessee 37064

Secretary: Michael Murphy

Address: 101 Forrest Crossing Blvd Suite 107, Franklin, Tennessee 37064

Treasurer: Michael Murphy

Address: 101 Forrest Crossing Blvd Suite 107, Franklin, Tennessee 37064

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. Brian Murphy, President

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



**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

**BIZFILINGS**

May 9, 2014

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 8040 EXCELSIOR DRIVE  
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**Request Type: Certificate of Existence/Authorization**  
**Request #:** 0127891

**Issuance Date:** 05/09/2014  
**Copies Requested:** 1

**Document Receipt****Receipt #:** 1500833**Filing Fee:** \$22.25**Payment-Credit Card - State Payment Center - CC #:** 156162820

\$22.25

**Regarding:** VERTEK SOLUTIONS, INC.**Filing Type:** Corporation For-Profit - Domestic**Control #:** 526673**Formation/Qualification Date:** 08/04/2006**Date Formed:** 08/04/2006**Status:** Active**Formation Locale:** TENNESSEE**Duration Term:** Perpetual**Inactive Date:****Business County:** WILLIAMSON 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

**VERTEK SOLUTIONS, 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 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

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