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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Countriuide PEO, Inc. Name of corporation - must include suffix
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:
David Kon
Name of Person
Name of Person Rodey Law Firm Firm/Company
Firm/Company
Firm/Company 301 South Bronough Street, Suite 200 Address
Address
Talla hassee, F1 32301 City/State and Zip code
City/State and Zip code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pavid You 11 850 1 425 - 6654
Pavid Yon at (850) 405 - 665 4 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section Division of Corporations Division of Corporations
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee, Certificate of Status Certified Copy 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. Countrywide PEO, I.c. (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) Tennessee
(State or country under the law of which it is incorporated) OI/21/2014
(Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Fox Road Suite F Knoxville, TN
(Principal office address) Fox 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 301 South Bronough Street, Suite 200 Office Address: 9. 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,

10. 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)

11. Maines and Dasmess addresses of Officers and at directors.
A. DIRECTORS
Chairman: Zachary Collier
Address: 135 Fox Boad, Suite F
Knoxville, TN 37922
Vice Chairman:
·
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Zachery Collier
Address: 135 Fox Road, Suite F
Knoxville, TN 37422
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If pecessary, you may attach an addendum to the application listing additional officers and/or directors.
12.
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.
13. ZAChary A. Collie R. CEO
(Typed or printed name and capacity of person signing application)

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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

PEGGY SMITH

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August 6, 2014

301 S. BRONOUGH STREET TALLAHASSEE, FL 32301

Request Type: Certificate of Existence/Authorization

Request #:

0135455

Issuance Date: 08/06/2014

Copies Requested:

Document Receipt

Receipt #: 1602697

Filing Fee:

\$22.25

Payment-Credit Card - State Payment Center - CC #: 157620661

\$22,25

Regarding:

CountryWide PEO Inc.

Filing Type:

Corporation For-Profit - Domestic

Formation/Qualification Date: 01/21/2014

Status: **Duration Term:** Active Perpetual

Business County: KNOX COUNTY

Control #:

743106

Date Formed:

01/21/2014

Formation Locale: TENNESSEE

inactive Date:

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

CountryWide PEO 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 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.

Secretary of State

Processed By: Cert Web User

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