

**F14000005479**

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 : FCA0000000023  
Phone : (850) 222-1092  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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RECEIVED  
14 DEC 29 PM 4:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**i3 Verticals Management Services, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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14 DEC 29 AM 11:42  
TALLAHASSEE, FLORIDA

*12/30/14*

Electronic Filing Menu

Corporate Filing Menu

Help

### COVER LETTER

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

**SUBJECT:** 13 Verticals Management 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:

Ann K. Rich

Name of Person

Waller Lansden Dortch & Davis, LLP

Firm/Company

511 Union Street, Suite 2700

Address

Nashville, TN 37219

City/State and Zip code

ann.rich@wallerlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ann K. Rich

at ( 615 ) 850-8745

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    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. 13 Verticals Management 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. Delaware 3. 30-0847828  
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. November 18, 2014 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 12/31/2014  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability)

7. 40 Burton Hills Blvd., Suite 200, Nashville TN 37215  
(Principal office address)

(same as above)  
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: National Registered Agents, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(City) (Zip code)

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.*

National Registered Agents, Inc.

By: Jwendolyn Andrews, Special Assistant Secretary  
(Registered agent's signature)

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.

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

**A. DIRECTORS**

Chairman: Greg Dally

Address: 40 Burton Hills Blvd., Suite 200, Nashville, TN 37215

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

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

Director: Scott Meriwether

Address: 40 Burton Hills Blvd., Suite 200, Nashville, TN 37215

Director: Clay Whitson

Address: 40 Burton Hills Blvd., Suite 200, Nashville, TN 37215

**B. OFFICERS**

President: Greg Dally

Address: 40 Burton Hills Blvd., Suite 200, Nashville, TN 37215

Vice President: Scott Meriwether

Address: 40 Burton Hills Blvd., Suite 200, Nashville, TN 37215

Secretary: Clay Whitson

Address: 40 Burton Hills Blvd., Suite 200, Nashville, TN 37215

Treasurer: Clay Whitson

Address: 40 Burton Hills Blvd., Suite 200, Nashville, TN 37215

NOTE: If necessary, 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, P.S.

13. Scott Meriwether, Vice President

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


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Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

*(Please attach additional pages as necessary)*

8. A certificate of existence, or a document of similar import, duly authenticated within 90 days prior to the date of this application, by the secretary of state or other official having custody of corporate records in the state or country of incorporation, accompanies this application.

9. Signature  \_\_\_\_\_  
Type or print name and title Scott Meriwether, Vice President

**NOTES:**

1. The filing fee is \$100.00. Make checks payable to SECRETARY OF STATE
2. A certificate of existence, or a document of similar import, duly authenticated within 90 days prior to the date of this application, by the secretary of state or other official having custody of corporate records in the state or country of incorporation, must accompany this application.
3. The document is to be signed by the chairperson of the board, the president, or other officer of the corporation. If directors have not been selected, the document is to be signed by an incorporator. If the corporation is in the hands of a court appointed fiduciary, the document is to be signed by the fiduciary. A copy of a signature is acceptable for filing. Verification is not required.
4. One copy of the document is to be delivered to the Secretary of State for filing.
5. The effective time and date of the document is the later of the following:
  - a. the time of filing on the date it is filed;
  - b. the time specified in the document on the date it is filed;
  - c. the time and date specified in the document, not later than 90 days after the date it is filed.
6. If the name of the corporation does not satisfy the requirements of section 401 of the Iowa Business Corporation Act, the corporation may do either of the following in applying for a certificate of authority:
  - a. add one of the following words or abbreviations to its corporate name for use in Iowa:  
corporation, incorporated, company, limited, corp., inc., co., ltd.;  
or
  - b. use a fictitious name to transact business in Iowa if the corporation's real name is unavailable and the corporation delivers to the secretary of state for filing a copy of the resolution of its board of directors, certified by its secretary, adopting the fictitious name.
7. The information you provide will be open to public inspection under Iowa Code chapter 22.11.

**SECRETARY OF STATE**  
Business Services Division  
Lucas Building, 1st Floor  
Des Moines, Iowa 50319

Phone: (515) 281-5204  
Fax: (515) 242-6953  
Website: [sos.iowa.gov](http://sos.iowa.gov)

# Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "I3 VERTICALS MANAGEMENT SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF DECEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "I3 VERTICALS MANAGEMENT SERVICES, INC." WAS INCORPORATED ON THE EIGHTEENTH DAY OF NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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SECRETARY OF STATE  
DELAWARE

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141585387

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1989089

DATE: 12-24-14