

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H15000154754 3)))



H150001547543ABC%

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)205-8842  
Fax Number : (850)878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**ServiceWear Apparel, Inc.**

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

Electronic Filing Menu

Corporate Filing Menu

Help

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 JUN 23 AM 8:30  
TALLAHASSEE, FLORIDA  
RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUN 23 PM 4:03

## COVER LETTER

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

**SUBJECT:** ServiceWear Apparel, 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

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip code

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JUN 23 AM 8:30

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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. ServiceWear Apparel, 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**

(State or country under the law of which it is incorporated)

**3. 27-0292219**

(FEI number, if applicable)

**4. 05/29/2009**

(Date of incorporation)

**5. Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6. 01/13/2015**

(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. 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

(City)

, Florida 33324

(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.*

C T Corporation System

By: Michael E. Jones

Michael E. Jones

(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.**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JUN 23 AM 8:30

DIVISION OF CORPORATIONS

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

**A. DIRECTORS SEE ATTACHMENT**

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

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

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

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

Director: Keith G. Wolken

Address: 7135 Charlotte Pike, Suite 100

Nashville, TN 37209

Director: Gerald L. Wolken

Address: 7135 Charlotte Pike, Suite 100

Nashville, TN 37209

**B. OFFICERS**

President: Keith G. 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.

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. Hiram A. Cox, Secretary

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 JUN 23 PM 8:30  
TALLAHASSEE, FLORIDA

**Attachment to Florida  
Officers & Directors**

1	Full Name:	Thomas R. Riley, JR.
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Other 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:	Other Director
	Business Address:	7135 Charlotte Pike, Suite 100
	City:	Nashville
	State:	TN
	ZIP Code:	37209

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
15 JUN 23 AM 8:30  
TALLAHASSEE, FLORIDA



**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

June 23, 2015

**Request Type: Certificate of Existence/Authorization**  
**Request #: 0166791**

**Issuance Date: 06/23/2015**  
**Copies Requested: 1**

**Document Receipt**

**Receipt #: 002114988**

**Filing Fee: \$22.25**

**Payment-Credit Card - State Payment Center - CC #: 163256989**

**\$22.25**

**Regarding: SERVICEWEAR APPAREL, INC.**

**Filing Type: For-profit Corporation - Domestic**

**Formation/Qualification Date: 05/29/2009**

**Status: Active**

**Duration Term: Perpetual**

**Business County: DAVIDSON COUNTY**

**Control #: 603430**

**Date Formed: 05/29/2009**

**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

**SERVICEWEAR APPAREL, 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

Processed By: Cert Web User

Verification #: 012503516