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To:

Email Address:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)205-8842 Phone 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. \*\*

FOREIGN	PROFIT/NONP	ROFIT CORP	ORATION	

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THE HARDENBERGH GROUP, INC.

FEB 2 4 2016

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## **COVER LETTER**

TO: Registration S Division of C							
The Ua	rdenbergh Group, Inc.						
SUBJECT:	SUBJECT: Name of corporation - must include suffix						
Dear Sir or Madam:	·						
"Certificate of Exister	ation by Foreign Corporation force," or "Certificate of Good Stign corporation to transact busings	anding" and check are sut					
Please return all corre	spondence concerning this matt	er to the following:					
	Name o	f Person					
	CT Corporati	on	<b>E8</b> 6				
	Firm/Co	mpany	8 T				
	Add	ress	100 2				
	City/State	and Zip code					
	E-mail address: (to be used	for future annual report	notification)				
For further informatio	n concerning this matter, please	call:					
	at (	<b>)</b> .					
Name of Pers	on Area Co	de Daytime Telep	hone Number				
Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	lection orporations 7				
Enclosed is a check for	r the following amount:						
<b>570.00</b> 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.	The Hardenberg	- · · · · · · · · · · · · · · · · · · ·		
	(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION	77
i	(If name unavaile	able in Florida, enter alternate corporate name :	adopted for the purpose of transacting	business in Florida)
2.	Delaware	3	47-5149580	
,	(State or country 09/24/2015	y under the law of which it is incorporated)	(FEI number, if app	licable)
4		of incorporation) 5,	(Date of duration, if other t	han perpetual)
6. <sub>.</sub> _ 4	2000 Six Mile. 5	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15		y)
7			al office address)	
8. 1	Name and <u>stree</u>	et address of Florida registered agent: (P.C	g address, if different)  D. Box NOT acceptable)	IN THE 2
	Name:	C T Corporation System		3 元
Off	ice Address:	Plantation, FL 33324	, Florida	
		(City)	(Zip code)	35 m W
Ha des furi	ving been nam ignated in this ther agree to co	ent's acceptance: ed as registered agent and to accept servic application, I hereby accept the appoints comply with the provisions of all statutes re amiliar with and accept the obligations of C T Corporation Sy	nent as registered agent and agre clative to the proper and complet I my position as registered agent.	e to act in this capacity e performance of my
	Ву:		ncent, Assistant Secretary & Vice	<u>∍ President</u>
		(Registered a	gent'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.

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

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman;	
·	
Address:	
Director:	
Address:	
Director:	
Address:	
71001033.	
D. OTWYSDDS	'
B. OFFICERS Pryor Smartt	<b>三公 5</b>
President;	聖 田田
Address: 4535 Harding Pike, Stc 105, Nashville, TN 37205	<del>2</del> 8 -
	(A) (A) [7]
Vice President:	En E O
Address:	P P
	5.61 W
Erick Clifford	
Secretary:  4535 Harding Pike, Ste 105, Nashville, TN 37205	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officer	s and/or directors.
12. Signature of Director or Officer	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms the are true and that he or she is aware that false information submitted in a document to the Depart a third degree felony as provided for in s.817.155, F.S.	
13. Pruor Smartt	
(Typed or printed name and capacity of person signing application)	

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## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE HARDENBERGH GROUP, 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-SECOND DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

5832816 8300 SR# 20161014904

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201867655

Date: 02-22-16