5/25/2016 4:20:05 PM From: To: 8506176383( 1/5 )

# Fibrida Department of State Divisit pof Copporations Dictrop of Filing Covers he

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.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA00000023
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 \*\* N

Email Address:\_

### FOREIGN PROFIT/NONPROFIT CORPORATION Ivey Self Storage, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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Corporate Filing Menu

Help

MRY 20 2016 J. HARRIS ) 5/25/2016 4:20:05 PM From: To: 8506176383( 2/5 )

#### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Ivey Self Storage Inc			
	of corporation	- must include suffix	
Dear Sir or Madam:			·
The enclosed "Application by Foreign C "Certificate of Existence," or "Certificate above referenced foreign corporation to	e of Good Star	iding" and check are submitted	
Please return all correspondence concern	ing this matte	r to the following:	
Tempe Lampe			
	Name of	Person	<del>.</del>
Ivey Self Storage Inc		·	
	Firm/Con	pany	-
203 Hancock Street			
Smithfield NC 27577	Addre	ess	
tempc.lampe@earthlink.net	City/State a	nd Zip code	
E-mail addres	s: (to be used t	for future annual report notific	ation)
For further information concerning this n	natter, please o	eall:	
Allison Jones CPA	919 at (	934-8452	
Name of Person	Area Cod	e Daytime Telephone I	Number
STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:	MAILING ADDRE Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions
Enclosed is a check for the following am  \$70.00 Filing Fee	g Fec & □	Certified Copy	887.50 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.

Ivey Self Stora	age Inc					
(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPORATED," Corp," "Ine," "Co," or "Corp,")	"COMPANY," "CORPORATION,"	,			
(If name unavai	lable in Florida, enter alternate corporate name ad	opted for the purpose of transacting	business in Florida)			
NC	•	1-0841528	,			
2. (State or count	3	(FEI number, if appl	icable)			
4. 11/16/15	5					
	5	(Date of duration, if other th	an perpetual)			
6. 4/01/16						
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	lorida, if prior to registration)  2, F.S., to determine penalty liability	)			
203 Hancock Str	reet, Smithfield NC 27577					
/	(Principal	office address)				
	(Current mailing	address, if different)	AC on			
		•				
8. Name and stre	ect address of Florida registered agent: (P.O.	Box NOT acceptable)	N T			
Name:	C T Corporation System					
Office Address:	1200 South Pine Island Road		PR 2			
	Plantation, FL 33324	, Florida	0.87ID			
	(City)	(Zip code)	<del>S</del>			
Having been named designated in this further agree to	gent's acceptance: ned as registered agent and to accept service s application, I hereby accept the appointme comply with the provisions of all statutes rel familiar with and accept the obligations of a	nt as registered agent and agree ative to the proper and complete ny position as registered agent. tom	to act in this capacity. I performance of my			
Ву	200	rdan Brown-Asst. Se	—			
(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.

11. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Tempe Lampe Chairman:			
203 Hancock Street Address:			<del></del>
Smithfield NC 27577			
Vice Chairman:			
Address: 203 Hancock Street			
Smithfield NC 27577			
Director: Alexander Ivey			
Address: 203 Hancock Street			
Smithfield NC 27577			
Director: Melissa Collins			
203 Hancock Street Address:			
Smithfield NC 27577			
B. OFFICERS			
President:			
203 Hancock Street			
Smithfield NC 27577			
Vice President:	SEL	<b>;</b>	
Address: 203 Hancock Street	至清	AAY	5 [
Smithfield NC 27577	AR.	S S	-2002 <del>23</del> Н 2 2
Secretary: Alexander Ivey	i.d	PM	7 1
203 Hancock Street, Smithfield NC 27577 Address:	2 A C C	i)	<b>!</b> /
Melissa Collins Treasurer:	Ü.	2.	
203 Hancock Street, Smithfield NC 27577 Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional off.	icers and/or direc	tors.	
12.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Signature of Director or Officer			
The officer or director signing this document (and who is listed in number 11 above) affirm are true and that he or she is aware that false information submitted in a document to the D a third degree felony as provided for in s.817.155, F.S.	epartment of Stat	e const	litutes
13. Temple Lampe, President Tempe Lampe President  (Typed or printed name and capacity of person signing application	<u> </u>	· 	
(Typed or printed name and capacity of person signing application	<b>)</b>		



## NORTH CAROLINA Department of the Secretary of State

#### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

#### IVEY SELF STORAGE INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 16th day of November, 2015, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

my hand and affixed my official seal at the City of Raleigh, this 25th day of May, 2016.

IN WITNESS WHEREOF, I have hereunto set

Secretary of State

6 laine I. Marshall

Certification# 98832535-1 Reference# 13220492- Page; 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification