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.

(((H16000152391 3)))



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

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 futu annual report mailings. Enter only one email address please. \*\*

Email Address:

### FOREIGN PROFIT/NONPROFIT CORPORATION ReNuke Services, Inc.

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

Electronic Filing Menu Corporate Filing Menu

Help

11001100

### COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT: Renuke Se	ervices, Inc.				
SUBJECT:	Name of corpora	tion - mu	st include suffix		
Dear Sir or Madam:	*				
"Certificate of Existence	on by Foreign Corporation e," or "Certificate of Good a corporation to transact bu	Standing'	and check are subn		
Please return all corresp	ondence concerning this ma	atter to th	e following:		
Norine Nagel				A N	? <b>₹</b>
<del></del>	Name	of Perso	n	26	<u> </u>
CT Corporation				57	
	Firm/	Company		100 mg	- <del>12</del> -L
8020 Excelsior Drive, Sui	te 200				
Address					ĊÒ
Madison, W1 53717					
norine.nagel@wolterskluv	•	ite and Zi	p code		<u>.</u>
	E-mail address: (to be us	sed for fu	ture annual report no	otification)	
For further information	concerning this matter, plea	ase call:			
Norine Nagel	a1 ( 608	8:	27-7660		
Name of Person		Code	Daytime Teleph	one Number	
STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ction rporations	
Enclosed is a check for	the following amount:				
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		3.75 Filing Fee & tified Copy	S87.50 Filing Certificate of Certified Co	f Status &

# 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.

Enter name of co	rporation; must include "INCORP	ORATED,	"COMPANY," "CORPORATION,	,,
inc., " "Co., : "Co	rp," "Inc," "Co," or "Corp.")			
	a de la companya de l			•
If name unavailab	ole in Florida, enter alternate corpo	orate name	adopted for the purpose of transacting	business in Florida)
TN	. •	3. 27-5498728		
(State or country	under the law of which it is incorp	porated)	(FEI number, if app	licable)
02/17/2010		5.		
(Date	of incorporation)		(Date of duration, if other the	han perpetual)
06/06/2016				
			n Florida, if prior to registration) 502, F.S., to determine penalty liability	у)
10 S ILLINOIS A	AVE STE F104, OAK RIDGE, TN	√37830-91	07 USA	5.00 -×
		(Princi	nal office address)	
	, (Cı	urrent maili	ng address, if different)	833 <b>7</b>
	• .			ME N
Name and <u>street</u>	address of Florida registered a	agent: (P.	O. Box NOT acceptable)	500 Harris
	C.T Corporation System			<u> </u>
Name:	C. I Corporation aystem			Sand Street
Name:				20
	1200 South Pine Island Road			20
	1200 South Pine Island Road Plantation, FL 33324		, Florida	?0 
Name:	1200 South Pine Island Road		, Florida (Zip code)	<i>&gt;</i> 20
ice Address:	Plantation, FL 33324  (City)		, Florida(Zip code)	?··· 20
ice Address:  . Registered age ving been name	Plantation, FL 33324  (City)  nt's acceptance: ed us registered agent and to a	accept serv	(Zip code)  vice of process for the above stated	l corporation at the
ice Address:  Registered age ving been namelgnated in this	Plantation, FL 33324  (City)  nt's acceptance: ed as registered agent and to a	accept serv	(Zip code) ice of process for the above stated ment as registered agent and agre	ee to act in this capa
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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.

6/22/2016 3:06:05 PM From: To: 8506176383( 4/5 )

## 11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Ian Howard Director: \_\_\_\_\_ 710 S ILLINOIS AVE STE F104, OAK RIDGE, TN 37830-9107 USA Address: -Mark Kirshe-----710 S ILLINOIS AVE STE F104, OAK RIDGE, TN 37830-9107 USA Address: B. OFFICERS Ian Howard President: 710 S ILLINOIS AVE STE F104, OAK RIDGE, TN 37830-9107 USA Address: Vice President: \_\_Mark Kirshe 710 S ILLINOIS AVE STE F104, OAK RIDGE, TN 37830-9107 USA Address: Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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. Ian Howard DQ (Typed or printed name and capacity of person signing application)

6/22/2016 3:06:05 PM From: To: 8506176383( 5/5 )



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

April 6, 2016

Request Type: Certificate of Existence/Authorization

Request #: 0198674 Issuance Date: 04/06/2016

Copies Requested:

Document Receipt

Receipt #: 002626485

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3668790050

\$20.00

Regarding:

ReNuke Services, Inc.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 02/17/2010

Status:

Active Perpetual

Duration Term:

Business County: ANDERSON COUNTY

Control #: Date Formed:

Inactive Date:

Formation Locale:

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

#### ReNuke Services, 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.

Secretary of State

Processed By Cert Web User

Verification #: 016829935