# F/6000005466

(Re	questor's Name)			
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### **COVER LETTER**

TO:	Registration Solivision of Co					
SUBJ	The Mal	ouf Company, Inc.				
00130		Name	of corporation	n - m	ust include suffix	
Dear S	ir or Madam:					
"Certif	icate of Existen		te of Good Sta	anding	g" and check are s	sact Business in Florida," ubmitted to register the
Please	return all corres	pondence concer	ning this matt	er to t	he following:	
Ralph A	A. Yelverton					
			Name o	f Pers	on	
Stubble	field & Yelvertor	n, PLLC				
	· · · · · ·		Firm/Co	mpany	y	· · · · · · · · · · · · · · · · · · ·
1400 M	leadowbrook Roa	d Suite 102				
			Add	ress		
Jacksor	n, Mississippi 392	11				
			City/State	and Z	ip code	71-44-3
ryelveri	ton@sy-law.com					
		E-mail addres	ss: (to be used	for fi	iture annual repor	t notification)
For fur	ther information	concerning this	natter, please	call:		
Ralph A	A. Yelverton		601 at (		936-4910	
	Name of Perso	on .	Area Co	de	Daytime Tele	phone Number
	STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FI	rporations g c Center Circle	SS:		MAILING Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27
Enclose	ed is a check for	the following am	ount:			
<b>□</b> \$70.	.00 Filing Fee	S78.75 Filir Certificate			8.75 Filing Fee & rtified 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.

(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in Florida)
Mississippi	3.	81-4174246
10/12/2016	y under the law of which it is incorporated)	(FEI number, if applicable)
(Date	of incorporation)	(Date of duration, if other than perpetual)
Name and stree	(Current mailing  et address of Florida registered agent: (P.O  Dana Schreiber	
Name:	et address of Florida registered agent: (P.O	Box NOT acceptable)
Name:	et address of Florida registered agent: (P.O Dana Schreiber  5541 Berrybrook Circle	Box NOT acceptable)
	et address of Florida registered agent: (P.O Dana Schreiber  5541 Berrybrook Circle	Box NOT acceptable)  16 UT

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
4 A.	Ditabolotto

Chairman	r'			
Address:				
-				
Vice Chai	irman:			
Address:				
Director:	Alexander J. Malouf, Jr.			
Address:	1317 Grand Blvd., Greenwood, Mississippi 38930			
Director:	Gardner Cash Malouf			
Address:	17404 Stillwood Lane			
-	Fairhope, Alabama 36532			
B. OFF	ICERS Alexander J. Malouf, Jr.	arvision	16 DEC	
	1317 Grand Blvd., Greenwood, Mississippi 38930	0 2 2 2 C	0-6 AH	<u> </u>
Vice Pres	Gardner Cash Malouf	11.3	<u>:</u>	_
Address:	17404 Stillwood Lane	35	<del>-</del>	
	Fairhope, Alabama 36532			
Secretary:	Alexander J. Malouf, Jr.			
Address:	1317 Grand Blvd., Greenwood, Mississippi 38930	<del></del>		
Treasurer	Alexander J. Malouf, Jr.			
Address:	1317 Grand Blvd., Greenwood, Mississippi 38930			
NOTE:		ectors	s.	
are true a	Signature of Director or Officer  per or director against this document (and who is listed in number 11 above) affirms that the facts and that he or she is aware that false information submitted in a document to the Department of S egree felony as provided for in s.817.155, F.S.	state tate co	d herei onstitu	in tes
13. ALE	EXANDER J. MALOUF, JR., President			



#### Delbert Hosemann Secretary of State

# Office of the Secretary of State Jackson, Mississippi

## Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on the 12th day of October, 2016, the State of Mississippi issued a Charter/Certificate of Authority to

#### THE MALOUF COMPANY, INC.

That the state of incorporation is Mississippi.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

That insofar as the records of this office are concerned, the said The Malouf Company, Inc. is in good standing at this time.

Given under my hand and seal of office the 9th day of November, 2016

C. Delbert Hosemann, Jr. Secretary of State

Certificate Number: CN16029982

Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx