

H170001860

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 : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

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

Email Address: _____

FILED
17 APR 25 AM 9:16
SCOTT COUNTY CLERK
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

Southeast Crane & Equipment, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

D. SCOTT

APR 26 2017

**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. Southeast Crane & Equipment, 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 3. 47-1084258
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 06/12/2014 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3030 N. Rocky Point Dr. Ste 150A, Tampa, FL 33607
(Principal office address)
- _____
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Registered Agents Inc

Office Address: 3030 N. Rocky Point Dr. Ste 150A

Tampa, Florida 33607
(City) (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.

Bee Hame

(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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Benny Godwin

Address: 1080 E. Grab Creek Road, Dickson, TN 37055

Director: Mary Godwin

Address: 1080 E. Grab Creek Road, Dickson, TN 37055

B. OFFICERS

President: Bonnie Godwin

Address: 1080 E. Grab Creek Road, Dickson, TN 37055

Vice President: _____

Address: _____

Secretary: Mary Godwin

Address: 1080 E. Grab Creek Road, Dickson, TN 37055

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Mary Beth Godwin

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.

13. Mary Beth Godwin / Secretary

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

17 APR 25 AM 9:16
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED



Tre Hargett
Secretary of State

Division of Business Services
Department of State
State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

REGISTERED AGENTS INC
3030 N. ROCKY POINT DR, STE 150A
TAMPA, FL 33607

April 25, 2017

Request Type: Certificate of Existence/Authorization
Request #: 0235764

Issuance Date: 04/25/2017
Copies Requested: 1

Document Receipt

Receipt #: 003342928

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3700553023

\$20.00

Regarding: Southeast Crane & Equipment, Inc.

Filing Type: For-profit Corporation - Domestic

Control #: 760899

Formation/Qualification Date: 06/12/2014

Date Formed: 06/12/2014

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: DICKSON COUNTY

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

Southeast Crane & Equipment, 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

Tre Hargett
Secretary of State

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