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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. WARREN 0CT 2 5 2017

COVER LETTER

TO:	Registration S Division of Co				1
SUBJ	ECT: Checa	Welocity, Inc.			
		Name of co	rporation	- must include suffix	
Dear S	ir or Madam:				
"Certif	icate of Existen	ition by Foreign Corporace," or "Certificate of C gn corporation to transa	iood Stai	nding" and check are su	net Business in Florida, bmitted to register the
Please	return all corres	pondence concerning th	is matte	r to the following:	
Mel	issa Vinco	nt			l
			Name of	Person	
Che	ex Velocity.	loc			1
مادمد	1	F	irm/Con	npany	
2100	? Elliston	Place			
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Nlaci	willo the	27412			ı
<u> </u>	nville, TN		v/State a	nd Zip code	
Mar	CC0 \0000	·		•	
iiia	13 SUL VIII (CEN	E-mail address: (to	be used:	for future annual report	notification)
		concerning this matter.			
Mel	Name of Perso		<mark>اوا</mark> rea Cod) <u>321 - 21455</u> c Daytime Telep	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclose	ed is a check for	the following amount:			
	.00 Filing Fee	☐ \$78.75 Filing Fee Certificate of State		S78.75 Filing Fee & Certified Copy	S87.50 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. Check-Velocity, 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. TN (State or country under the law of which it is incorporated) 3. (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2109 Elliston Place, Nashville, TN 37203 7._ (Current mailing address, if different) 11 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Richard Pikington

1363 West County Hwy 30a, Unt 3111

Santa Rosa Beach, Florida 32459

(City) (Zip code) Name: Office Address: 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. (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
Chairman: Richard Pilkington
Address: 2109 Elliston Place
Nashnile, TN 37203
Vice Chairman:
Address:
Director: David Newman
Address: 2109 Elliston Place
Nashville, TN 37203
Director: Melissa Vincent = 5
Address: 209 Elliston Place
Nashville, TN 37203
B. OFFICERS
President: Richard Pilkington
Address: 2109 Elliston Place
Nashville, TN 37203
Vice President: David Newman
Address: 2109 Elliston Place
Nashville, TN 37203
Secretary: Mclissa Vincent
Address: 2109 Elliston Place, Nashville TN 37203
Treasurer: Mclissa Vincent
Address: Sume
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. Milling, Ulincent.
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. Melissa Vincent Secretury
(Typed or printed name and capacity of person signing application)



Division of Business Services Department of State

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

MELISSA VINCENT

2109 ELLISTON PL

NASHVILLE, TN 37203-5203

September 21, 2017

Request Type: Certificate of Existence/Authorization

Request #:

0251446

Issuance Date: 09/21/2017

Copies Requested:

Document Receipt

Receipt #: 003584985

Filing Fee:

\$20.00

Payment-Check/MO - CHECKVELOCITY, INC., NASHVILLE, TN

\$20.00

Regarding:

CHECKVELOCITY, INC.

Filing Type:

For-profit Corporation - Domestic

Control #:

429765

Formation/Qualification Date: 07/08/2002

Date Formed:

07/08/2002

Status:

Active

Formation Locale: TENNESSEE

Duration Term:

Perpetual

Inactive Date:

Business County: DAVIDSON 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

CHECKVELOCITY, 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: Kristen McCoy

Verification #: 024241018