F1800001947

(Rec	questor's Name)	
(110)	questor s traine,	
(Add	dress)	
(
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	





100311044401

04/24/18--01034--010 ***650.00 04/02/18--01031--022 **70.00

2010 MPR 23 P 1: 50

ILED



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

April 3, 2018

LARRY B SMITH 2501 MCGAVOCK PIKE, SUITE 100 NASHVILLE, TN 37214

SUBJECT: SOUTHERLAND, INC. Ref. Number: W18000031729

We have received your document for SOUTHERLAND, INC. and your check(s) of totaling \$70.00. However, the second source that second source that second source the second source that second source the second source that second sou totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$650.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 818A00006657

COVER LETTER

TO: Registration Section Division of Corporations			
Southerland, Inc.			
SUBJECT:	lame of corporation -	must include suffix	······································
Dear Sir or Madam:			
The enclosed "Application by Forei "Certificate of Existence," or "Certificate of Existence,"	ficate of Good Standi in to transact business	ng" and check are sub in Florida.	
	Name of Pe	rson	
Southerland, Inc.			Fig.:
2501 McGavock Pike, Suite 100	Firm/Compa	ny	50 RIDA
	Address		
Nashville, TN 37214			
dswisher@southerlandsleep.com	City/State and	Zip code	
E-mail a	ddress: (to be used for	future annual report n	otification)
For further information concerning	this matter, please cal	i:	
Deb Dresslar	615 at (226-9650	
Name of Person	Area Code	Daytime Telepl	none Number
STREET/COURIER ADI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
Enclosed is a check for the following	ig amount:		
		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

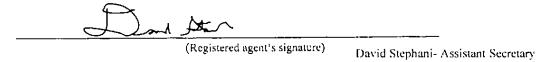
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

"Inc.," "Co.," "Co	rp," "Inc," "Co," or "Corp.")		
Southerland Mat	tress, Inc.		
(If name unavaila Tennessee	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting 65-0190550	g business in Florida)
(State or country 2-4-1933	under the law of which it is incorporated) 5.	(FEI number, if app	olicable)
(Date of incorporation) 06-30-17		(Date of duration, if other than perpetual)	
2501 McGavock	(SEE SECTIONS 607.1501 & 607.1 Pike, Suite 100 Nashville, TN 37214 (Princi	n Florida, if prior to registration) 502, F.S., to determine penalty liability pal office address)	
N	(Current maili <u>1 address</u> of Florida registered agent: (P.	ing address, if different) O. Box NOT acceptable)	AFR 23 P 1: 50
	CT Corporation System		٠ لند
Name and sires Name: ffice Address:	CT Corporation System 1200 South Pine Island Road Plantation	33324	815 815 815 815 815 815 815 815 815 815

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.



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. DIRI	ECTORS			
∠ Chairman	Paul Bagoon	_		<u> </u>
Address:	1973 Southerland Dr			
	Nashville, TN 37207			
√ice Chai	Jack Nugent rman:			
Address:	1973 Southerland Dr			
	Nashville, TN			
√Director:	Larry B Smith			
Address:	1973 Southerland Dr			
	Nashville, TN			
Director:	Barry Elkins		- 12	
Address:	1973 Southerland Dr	 } - - -	2010	
	Nashville, TN	AHAS	 APA	
B. OFF	ICERS	S: ::	23	i
	Larry B Smith	<u></u>	σ	
	1973 Southerland Dr	ONIE!	<u>∵</u>	
Audicss.	Nashville, TN	>	- 6	
Vice Pres	ident:			
Address:				
Secretary:				
Address:				
/freasurer	Barry Elkins			
Address:	1973 Southerland Dr. Nashville, TN			
NOTE:	If necessary, you may attach in adjusted in to the application listing additional officers	and/or d	lirectors	í .
12. 😾	San (SMALLY)			
The office	Signature of Director or Officer ser or director signing this document (and who is listed in number 11 above) affirms that	t the fac	rts stated	d herein
are true a	and that he or she is aware that false information submitted in a document to the Departing regree felony as provided for in s.817.155, F.S.			
	y B. Smith			
1-7	(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

DEB DRESSLAR			≓ Mar	ch 2	8, 2018
SUITE 100					·
2501 MCGAVOCH	(PIKE		<u>}</u> ⊒=	A P P	-11
NASHVILLE, TN	37214		12.5	ಸ್ 2	
Request Type: C	ertificate of Existence/Authorization	!ssuance Date:	03128/20	ىي 18	m
Request #: 02	271684	Copies Request	ed <u>i.</u>	íΌ	
	Document Receipt		9:5		
Receipt #: 00396	88544	Filing	Fee:	50	\$20.00
Payment-Credit C	ard - State Payment Center - CC #: 3725566038				\$20.00
Regarding:	SOUTHERLAND, INC.				
Filing Type:	For-profit Corporation - Domestic	Control #:	29026		
Formation/Qualification Date: 02/04/1933		Date Formed:	02/04/1	933	
Status:	Active	Formation Locale:	TENNE	SSEE	•
Duration Term:	Perpetual	Inactive Date:			
Business County:	DAVIDSON COUNTY				

CERTIFICATE OF EXISTENCE

1, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

SOUTHERLAND, 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, interest, 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 Secretary of State

Processed By: Cert Web User Verification #: 027133123