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Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

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HO.035 #002 HIRCOO340398 Rep. 2064

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 507, 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

i	Than Home Solutions, In	L.		
(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp ")	"COMPANY," "CORFORATION,"	, <u> </u>	
Titan Home Sol	utions, Inc. of Florida			
(If name quavoil)	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)	
2.	Georgia 3.	26-4038323		
(State or country under the law of which it is incorporated)		(FE) number, il appl	(FEI number, il'applicable)	
Junuary 14, 2009		Perperual		
4(Date	of incorporation)	(Date of duration, if other th	(Date of diration, if other than perpetual)	
6	ALL ST. F. T. S. Market Market Strangers	r Florida, if prior to registration)		
	(SEE SECTIONS 607.150) & 607.1	502, F.S., to determine penalty liability)	
7		rail, Canton, GA 30115	6 <u>6</u>	
·	(Princi)	pai office address)		
	202 Schley Ti	mil, Canton, GA-30115		
	(Current mail)	ng address, il different)	NOV 30	
8. Name and <u>succ</u>	at address of Florida registered agent: (P.)	D. Box <u>NOT</u> acceptable)		
Name:	Scan Alford		9; 9;	
Office Address:	572 Grouper, Box D25			
	Panama City Beach	32408 , Florida		
	(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.



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 Scoretary 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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11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
Sean Alford President:
202 Schley Trail, Canton, GA 30115
Kay Alford
202 Schley Trall, Canton, GA 30115 Address:
Address
Secretary:
Address:
Trensurer:
Address:
NOTE: If necessary, you may attach an addendum to the application disting additional officers and/or directors.
12 J Signature of Director or Officer
The officer or director signing this document (and who is listed in number 11 above) afterms that the facts stated herein
are true and that he or she is aware that false information automitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
13 Sean Alford, President
(Typed or printed name and capacity of person signing application)

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STATE OF GEORGIA

Sccretary of State Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I. Robyn A. Crittenden, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

TITAN HOME SOLUTIONS, INC.

a Domestic Profit Corporation

 $(a,b) \in \mathbb{R}^{n} \times \mathbb{R}^{n}$

was formed in the jurisdiction stated below on was nuthorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether of not a notice of intent to dissolve, an application, for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to little 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number: 16296508Date Inc/Auth/Filed:01/14/2009Jurisdiction: GeorgiaPrint Date: 11/29/2018Form Number: 211



Q. Cuite

Robyn A. Crittenden Secretary of State

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