

F19000000023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2019 JAN -2 P 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 JAN -2 PM 3:47

12/10/18

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserve.com
e-mail: info@incserv.com

incserv

ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 1/2/2019

PRIORITY Routine

OUR REF # (Order ID#) 711541

ORDER ENTITY

NATIONAL SMALL BUSINESS SOLUTIONS, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

NATIONAL SMALL BUSINESS SOLUTIONS, INC. (FL)

File the attached foreign qualification document

NOTES:

\$70.00 Authorized

Email address for annual report reminders: Corinne@corp-smart.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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.

National Small Business Solutions, Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Tennessee

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
December 12, 2005 Perpetual

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
Upon Filing

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
5400 Poplar Avenue, Suite 310, Memphis, Tennessee 38119

7. _____
(Principal office address)

(Current mailing address, if different)

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

NRAT Services, Inc.

Name:

1200 South Pine Island Road

Office Address:

Plantation

33324

(City)

, Florida

(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.

Courine D. James - Austin

(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.

2010 JAN - 2 P 10: 22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Robert S. Shaw

Chairman:

5400 Poplar Avenue, Suite 310

Address:

Memphis, Tennessee 38119

Lewis Perkins

Vice Chairman:

5400 Poplar Avenue, Suite 310

Address:

Memphis, Tennessee 38119

Director:

Address:

Director:

Address:

B. OFFICERS

Robert S. Shaw

President:

5400 Poplar Avenue, Suite 310

Address:

Memphis, Tennessee 38119

Lewis Perkins

Vice President:

5400 Poplar Avenue, Suite 310

Address:

Memphis, Tennessee 38119

Secretary:

Address:

Treasurer:

Address:

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

12. Lewis Perkins

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. Lewis Perkins, Vice Chairman

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

FILED
2011 JAN - 2 PM 10:22
TALLAHASSEE FLORIDA



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

MELISSA HOPTON
MELISSA HOPTON
SUITE 202
106 5TH AVE SE
OLYMPIA, WA 98501

December 28, 2018

Request Type: Certificate of Existence/Authorization
Request #: 0300828

Issuance Date: 12/28/2018
Copies Requested: 1

Document Receipt

Receipt #: 004432864

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3746639303

\$20.00

Regarding: National Small Business Solutions, Inc.

Filing Type: For-profit Corporation - Domestic

Formation/Qualification Date: 12/12/2005

Status: Active

Duration Term: Perpetual

Business County: SHELBY COUNTY

Control #: 508333

Date Formed: 12/12/2005

Formation Location: TENNESSEE

Inactive Date:

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

National Small Business Solutions, 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

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