# F1900000528

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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W1900004748	

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01/08/19--01011--004 \*\*70.00





#### **COVER LETTER**

TO: Registration Section

Division of Corporations

Harris Senior Services nc. SUBJECT:

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

endy Harris Name of Person Senior Services, Inc. Firm/Company Emmons Canyon Dr. Address 94507 City/State and Zip code amo, CA Wendyhe Carepatrol. Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nendy Harris at (251) 895-2828 Name of Person Area Code Daytime Telephone Number

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

Enclosed is a check for the following amount:

Ø \$70.00 Filing Fee □ \$

Certificate of Status

□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RESISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1	Harris Senier Services (Finter name of corporation, must include "INCORPORATED."	<u>nc</u>			
	(Futer name of corporation, must include "INCORPORATED,"	COMPANY," "CORPORATION,"			
	The T "Co.," "Corp," The," "Co." or "Corp ")				
	ill name unavailable in Florida, enter alternate corporate name ad	onted for the purpose of transacting business in Florida)			
		45 - 4413 0 36 (FEI number, if applicable)			
2	-Alabama3_				
	(State or country under the law of which it is incorporated)	(FEI number, if applicable)			
4	2/2/2012 5				
	(Date of incorporation)	(Date of duration, if other than perpetual)			
6	1/1/2019 1/2/2019				
	(Date first transacted business in				
	(SEE SECTIONS 607.1501 & 607.150	• • •			
7.	1476 Emmone Canyon Dr	11amo (+ 1450+			
	(Principal office address)				
	(Current mailing	address, if different)			
	(	,,			

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

Onya-Love Name:, Sq13 Hertford C.r Office Address: Pensa (ola , Florida\_3

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

19 JAN 29 PH 4:

A. DIRECTORS    Chairman:			
Chairman:			
Address:			
Vice Chairman:			
Address:			
	_		
Director:			
Address:	—		
	<u> </u>		
Director:	<u> </u>		
Address:			
B. OFFICERS $\left( \frac{1}{2} \right)$ $\left( \frac{1}{2} \right)$ $\left( \frac{1}{2} \right)$			
President: Wendy Harris			
Address: 1476 Emmons Canyon Dr. Alance, (A 94507		~	
	SEC	610	
Vice President:	-AET	JAN	AP
Address:	ARY	29	
		PH	E CON
Secretary:	ALS	÷	Ċ
AJdress:	-SH	07	
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.			
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13. <u>Mendy Harris President of Harris Solici Serv</u>ices, Inc. (Typed or printed name and capacity of person signing application)

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

## STATE OF ALABAMA

### I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that HARRIS SENIOR SERVICES, INC. was formed in Baldwin County, Alabama on February 2, 2012. The Alabama Entity Identification number for this entity is 039-473. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

01/23/2019

Date

X 74. Mmill

John H. Merrill

Secretary of State