

F1900000/370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

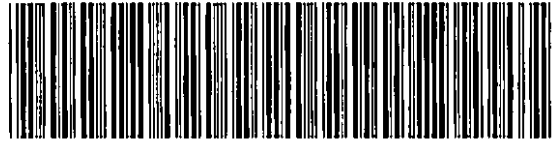
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

BRUCE  
MAR 25 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BARRETT-SIMPSON, INC.  
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:

TIMOTHY W. SIMPSON  
Name of Person  
BARRETT-SIMPSON, INC.  
Firm/Company  
706 12<sup>TH</sup> STREET  
Address  
PHENIX CITY, AL 36867  
City/State and Zip code  
tsimpson@barrett-simpson.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tim Simpson at ( 334 ) 297-2423 or cell 334-468-6159  
Name of Person Area Code Daytime Telephone Number

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STATE DEPARTMENT OF REVENUE

**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:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Status
- \$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.

1. BARRETT-SIMPSON, 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. ALABAMA (State or country under the law of which it is incorporated) 3. 63-1117199 (FEI number, if applicable)

4. APRIL 8, 1994 (Date of incorporation) 5. PERPETUAL (Date of duration, if other than perpetual)

6. NONE YET (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 706 12TH STREET, PHENIX CITY, AL 36867 (Principal office address)

706 12TH STREET, PHENIX CITY, AL 36867 (Current mailing address, if different)

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

Name: WILLIAM L. MORKES

Office Address: 3610 BARRANCAS AVENUE

PENSACOLA, Florida 32507 (City) (Zip code)

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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.

William L. Morkes

(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: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: TIMOTHY W. SIMPSON

Address: 641 HWY 26, HATCHECHUBBEE, AL 36858

Vice President: GEORGE W. BARRETT

Address: 726 NORTH RANDOLPH AVE, EUFAULA, AL 36027

Secretary: MATTHEW BLAKE RICE

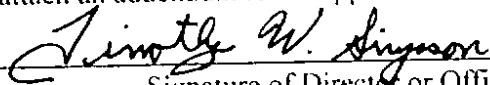
Address: 1392 COUNTY ROAD 481, CUSSETA, AL 36852

Treasurer: CHRISTOPHER ROGERS

Address: 22 LEE ROAD 2118, SMITHS, AL 36877

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

12.   
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. TIMOTHY W. SIMPSON, PRESIDENT, BARRETT-SIMPSON, 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 Barrett-Simpson, Inc. was formed in Russell County, Alabama on April 8, 1994. The Alabama Entity Identification number for this entity is 163-358. 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.**

03/06/2019

Date

John H. Merrill

Secretary of State