# P90000169S

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
Office Use Only							



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# FLORIDA DEPARTMENT OF STATE Division of Corporations

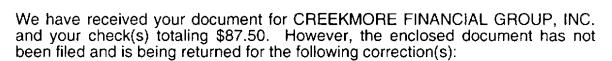
4.

March 25, 2019

R. LARRY CREEKMORE 2025 INLAND DR FRANKLIN, TN 37064

SUBJECT: CREEKMORE FINANCIAL GROUP, INC.

Ref. Number: W19000029503



The name and title of the person signing the document must be noted beneath or opposite the signature.

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: 219A00005882

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## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJ	ECT: Creekmore Financial Group,	Inc.		
	Name	of corporation	- must include suffix	
Dear S	ir or Madam:			
"Certif	closed "Application by Foreign C icate of Existence," or "Certificat referenced foreign corporation to	c of Good Star	nding" and check are su	sact Business in Florida," ubmitted to register the
Please	return all correspondence concern	ning this matter	r to the following:	بر ا ا
R. Larr	y Creekmore			· ==
		Name of	Person	<del> </del>
Creekir	ore Financial Group, Inc			
		Firm/Com	npany	in the state of th
<u>2025 In</u>	land Drive	· <del></del> -		
Franklii	a, TN 37064	Addro	ess	· <del>-</del>
larry@c	reckmorefinancial.com	City/State a	nd Zip code	
	E-mail address	s: (to be used t	for future annual report	notification)
For fur	ther information concerning this n	natter, please c	eall:	
R. Larry	· Creekmore	850 at (	217-6171	
	Name of Person	Area Cod	e Daytime Tele	phone Number
Enclose	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 ed is a check for the following amo		MAILING A Registration of C Division of C P.O. Box 632 Tallahassee,	Section Corporations 27
□ \$70.	00 Filing Fee		\$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.

<ol> <li>Creekmore Finar</li> </ol>	icial Group, Inc					
(Enter name of co	orporation; must include "INCORPORATE orp," "Inc." "Co," or "Corp.")	ED," "COMPA	ANY," "CORPORA"	rion,"		
	NORE FINANCIAL of FL.					
(If name unavaila	ble in Florida, enter alternate corporate na	me adopted fo	r the purpose of trans	acting business	s in Flor	ida)
2 Tennessee		3. 20-03542	98			
(State or country	under the law of which it is incorporated)	· · · · · ·	(FEI number,	if applicable)	نت	
4	20-18	5		ŗ -		
(Date	of incorporation)	(	(Date of duration, if e	ther than perpe	etuàl)	
6	1-1223 as a flopida	Corpora	itun		=	j
	(Date first transacted busines	ss in Florida, it	f prior to registration)		C.	
	(SEE SECTIONS 607.1501 & 60	7.1502, F.S., to	o determine penalty li	ability)-	ξ <u>5</u>	
7. 2025 Inland Drive	Franklin, TN 37064					
-	(Prii	ncipal office ac	idress)	7-	1.47	
	(Current ma	iling address,	if different)			
	<b>\</b>	,				
8 Name and street	address of Florida registered agent: (	D O Dov M	OT againtable)			
o. Trame and street		1.0. box <u>m</u>	<u>Jr</u> acceptable)			
Name:	Luke Sinih					
Office Address:	151 Regions Way Sta	2 GB				
	151 Regions Way Sta Dostin		mids 32541			
	(City)	, , P10	(Zip code)			
9. Registered ager	nt <sup>3</sup> s accentance:					

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.

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

# A. DIRECTORS Chairman: R. Larry Creekmore Address: 2025 Inland Drive Franklin, TN 37064 Vice Chairman: Address: \_\_\_\_\_ Director: \_\_\_\_\_ Address: Address: **B. OFFICERS** President: R. Larry Creekmore Address: 2025 Inland Drive Franklin, TN 37064 Vice President: Address: Secretary: Address: Treasurer: Address: \_\_\_\_\_ NOTE: If necessary you navy attach an addendum to the application listing additional officers and/or directors. 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. 6-FRRA

(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

LARRY CREEKMORE

2025 INLAND DR

FRANKLIN, TN 37064-1859

March 13, 2019

Request Type: Certificate of Existence/Authorization

Request #:

0309036

Issuance Date: 03/13/2019

Copies Requested:

2

**Document Receipt** 

Receipt #: 004623059

Filing Fee:

\$40.00

Payment-Check/MO - Creekmore Financial Group, Inc, MIRAMAR BEACH, FL

**'\$40.00** 

Regarding:

Creekmore Financial Group, Inc.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 12/20/2018

Status:

Active

Duration Term:

Perpetual

Business County: WILLIAMSON COUNTY

Control #:

1000650

Date Formed:

12/20/2018

Formation Locale: 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

#### Creekmore Financial Group, 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 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.

Secretary of State

Processed By: Carol Dickerson

Verification #: 032300822