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Y SCOTT

### **COVER LETTER**

TO:	Registration Section					
	Division of Corporations					
CEUD	Caesar Logistics Inc					
SUBJ	Name o	of corporatio	n – must	include suffix		
	rane	n corporatio	ii - iiiusi	merade some		
Dear S	Sir or Madam:					
"Certi	nclosed "Application by Foreign Co ficate of Existence," or "Certificate referenced foreign corporation to tr	of Good Sta	nding":	and check are subi		
	return all correspondence concerni Augustus	ng this matte	er to the	following:	SE	20.00
<del></del>		Name of	` D		P 22 3	<u> </u>
Caesar	Logistics Inc	Name of	rerson		HASS	TILE T
		Firm/Cor	npany		Fg	고
241 In	verness Drive				E.S.	PH F.
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Hubert	NC 28539	Addi	ess		DE A	. <b>F</b>
-		City/State	ind Zip	code		
roger@	Deaesarlogistics.com	•				
	E-mail address	: (to be used	for futu	ire annual report n	otification)	
For fu	rther information concerning this m	atter, please	call:			
Roger	Augustus	910	238	-0828		
	Name of Person	at (	)	Daytime Teleph	none Number	•
	Name of Person	Alea Co	JC.	Daytine relept	ione Number	
	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:		MAILING AI Registration Sc Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	
Enclo	sed is a check for the following amo	ount:				
<b>s</b> 7	0.00 Filing Fee	_		75 Filing Fee & fied Copy	S87.50 Filin Certificate of Certified Co	of Status &

## 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.

Caesar Logistics Inc

		orp," "Inc," "Co," or "Corp.")  able in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in Florida)
	North Carolina		46-5565943
2.	16.	y under the law of which it is incorporated)	(FEI number, if applicable)
	May 9, 2014		
4.		5.	·
4. (Date of incorporation) (Date of duration, if other than perpetual April 30th 2019 6.			(Date of duration, if other than perpetual)
7		ve, Hubert NC 28539	1502, F.S., to determine penalty liability)  TALLARY  ripal office address)
		(Current maili	ing address, if different)  O. Box NOT acceptable)
			~ · · · · · · · · · · · · · · · · · · ·
8.		et address of Florida registered agent: (P. Crystal Cashwell	▶
	Name and <u>stree</u> Name: ffice Address:		<i>▶</i>
	Name:	Crystal Cashwell 953 10th Street	<i>▶</i>

#### 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.

Custu Cashwell
(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.

A. DIRECTORS Roger Augustus Chairman: 241 inverness Drive Address: Hubert NC 28539 Vice Chairman: Address: Director: \_\_\_ Address: \_\_\_\_ **B. OFFICERS** Roger Augustus President: 241 Inverness Drive Address: Hubert NC 28539 Vice President: Address: \_\_\_\_\_\_ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Calul to 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. Roger Augustus - President 13. \_\_\_

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

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



# NORTH CAROLINA Department of the Secretary of State

#### CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

#### **CAESAR LOGISTICS, INC**

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 9th day of May, 2014, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 14th day of May, 2019.

Elaine I. Marshall

Secretary of State