

To:

8/5/19

2019-08-05 12:36 CST

202357

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000233724 3)))



H190002337243ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

RECEIVED
TALLAHASSEE, FLORIDA

2019 AUG -5 PM 4:30

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

The SEFA Group, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

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. The SEFA Group, 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. South Carolina 3. 58-17165568
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/21/1976 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 217 Cedar Road Lexington, SC 29073
(Principal office address)
- same
(Current mailing address, if different)

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

Name: CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD
PLANTATION, Florida 33324
(City) (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.

Bree Zahner

Bree Zahner, Assistant Secretary

(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.

FILED
2019 AUG -5 PM 4:30
ALLA MISS FLORIDA

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

A. DIRECTORS

Chairman: TOM HENDRIX ✓
 Address: 217 CEDAR ROAD
LEXINGTON, S.C. 29073

Vice Chairman: GREGG HENDRIX ✓
 Address: 217 CEDAR ROAD
LEXINGTON, S.C. 29073

Director: LEE ANN WAGNER ✓
 Address: 735 OLOE CENTRAL WAY
MT. PLEASANT, SC. 29464

Director: _____
 Address: _____

FILED
 2019 AUG -5 PM 4:30
 TALLAHASSEE FLORIDA

B. OFFICERS

President: Tom Hendrix ✓
 Address: 217 CEDAR ROAD
LEXINGTON, S.C. 29073

Vice President: Gregg Hendrix ✓
 Address: 217 CEDAR ROAD
LEXINGTON, S.C. 29073

Secretary: COO: Jim Clayton ✓
 Address: + SECRETARY 217 CEDAR ROAD LEXINGTON, S.C. 29073

Treasurer: CFO: Bret Harris ✓
 Address: 217 CEDAR ROAD LEXINGTON, S.C. 29073

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

12. Bret J. Harris, CFO
 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. Bret J. Harris, CFO
 (Typed or printed name and capacity of person signing application)

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

THE SEFA GROUP, INC., a corporation duly organized under the laws of the State of South Carolina on April 21st, 1976, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal
of the State of South Carolina this 23rd day
of July, 2019.

A handwritten signature of Mark Hammond in cursive script.
Mark Hammond, Secretary of State