

F19000004851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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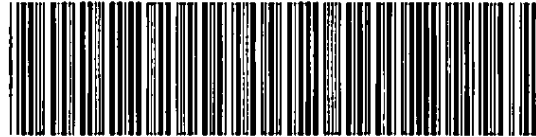
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/18/19--01010--024 **78.75

T. CLINE
OCT 25
EXAMINER

FILED
2019 OCT 16 AM 11:03
CLERK OF STATE
TALLAHASSEE, FLORIDA



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October 10, 2019

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Savannah's on Main, Inc.

To whom it may concern:

The Enclosed Application by Foreign Corporation and Fee(s) are submitted for filing. Also, please find enclosed a check for state filing fees in the amount of **\$78.75** made payable to the FL Dept of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addressed stamped envelope included.

Sincerely,

Amanda J. Beren, Sr. Document Analyst
CorpNet, Incorporated
888-449-2638 Ext. 105
filings@corpnet.com

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2019 OCT 16 AM 11:03
CLERK OF COURT
TALLAHASSEE, FL 32310



**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.*

Savannah's on Main, 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)

North Carolina

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

11/12/2003

(Date of incorporation)

(Date of duration, if other than perpetual)

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

275 Fresnel Lane, St. Augustine, FL 32095

(Principal office address)

275 Fresnel Lane, St. Augustine, FL 32095

(Current mailing address, if different)

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

Name: Barbara Cokley

Office Address: 275 Fresnel Lane

St. Augustine

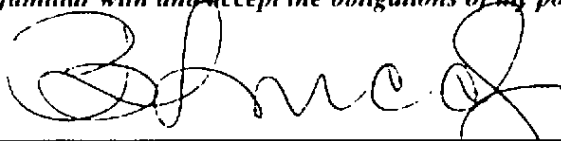
(City)

Florida 32095

(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.*



(Registered agent's signature)

10/9/2019

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.

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TAMMISTE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Barbara Cokley

Address: 275 Fresnel Lane

St. Augustine, FL 32095

Director: _____

Address: _____

B. OFFICERS

President: Barbara Cokley

Address: 275 Fresnel Lane

St. Augustine, FL 32095

Vice President: _____

Address: _____

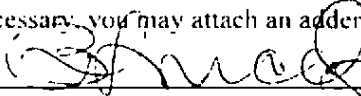
Secretary: Barbara Cokley

Address: 275 Fresnel Lane, St. Augustine, FL 32095

Treasurer: Barbara Cokley

Address: 275 Fresnel Lane, St. Augustine, FL 32095

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

12.  10/9/2019

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. Barbara Cokley, President  10/9/2019

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

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NORTH CAROLINA

Department of the Secretary of State

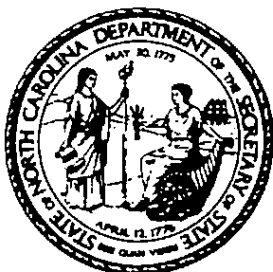
CERTIFICATE OF EXISTENCE

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

SAVANNAH'S ON MAIN, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 12th day of November, 2003, 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.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 8th day of October, 2019.

Elaine F. Marshall

Secretary of State