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EXAMINER

ZIA BUT ST WHISTON

COVER LETTER

	stration Section ion of Corporations				
SUBJECT:	Bayliss Brokerage, Inc.				
JOBSEC 1.	Name	e of corporation	ı - must include suffix		
Dear Sir or M	ladam:				
Certificate o		ite of Good Star	Authorization to Transact Inding" and check are submites in Florida.		
Please return Chris Parker	all correspondence concer	ming this matter	r to the following:		
		Name of	Person		
Bayliss Brokei	rage, Inc.				
		Firm/Con	npany		 -
PO Box 300					
Wanchese, NC	27981	Addro	ess		
		City/State a	nd Zip code		
cparker@bayli	issboatworks.com				
·	E-mail addre	ss: (to be used	for future annual report not	ification)	
For further in	formation concerning this	matter, please	call:		
Chris Parker		252 at (473-9797)		2419 CCT 3 I
Nam	e of Person	Area Cod	e Daytime Telephor	ne Number	نا با
Regis Divis Clifto 2661	EET/COURIER ADDRE stration Section ion of Corporations on Building Executive Center Circle hassee, FL 32301	SS:	MAILING ADE Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion	44 St 05
Enclosed is a	check for the following ar	nount:			
□ \$70.00 Fil	ling Fee	•	3 \$78.75 Filing Fee & Gertified Copy	■ \$87.50 Filing Certificate of Certified Cop	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.

Bayliss Broker 1.	rage, Inc.				
	corporation; must include "INCORPORATED." - Corp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,			
(If name unavai	lable in Florida, enter alternate corporate name ad	opted for the purpose of transacting	business in F	lorida)	
North Carolina		2-2897372			
(State or country under the law of which it is incorporated) September 27, 2017		(FEI number, if applicable)			
	te of incorporation)	(Date of duration, if other the	(Date of duration, if other than perpetual)		
6					
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)	Florida, if prior to registration) 2. F.S., to determine penalty liability	v)		
800 Village Squ	are Crossing, Suite 356, Palm Beach Gardens, FL		,		
1	(Principal	office address)			
Bayliss Brokera	ige, PO Box 300, Wanchese, NC 27981		_	5	
	(Current mailing	address, if different)		12.7	
8. Name and stre	eet address of Florida registered agent: (P.O.	Box NOT acceptable)	•••••	۲.	
Name:	CT Corporation System	<u> </u>	 	T*	
Office Address:	1200 South Pine Island Road		\$ \$.	50 S	
	Plantation	 33324 , Florida		C.	
	(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.

Ĭ,

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.

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

	ECTORS John F. Bayliss Jr.			
	6581 Ina Waterfield Way			
Address:	Manns Harbor, NC 27953			
Vice Chai	rman:			
Address:				
Director:				
Address:				
Director:				
Address:				
B. OFF	ICERS	•	is i	
President:	John F. Bayliss Jr.	17.		
	6581 Ina Waterfield Way		<u>-</u>	
	Manns Harbor, NC 27953	······································	社	
Vice Presi	ident:	fu . 		
Address:				
	Hilda Bayliss			
Secretary:	6581 Ina Waterfield Way, Manns Harbor, NC 27953			
	·			
		17 1:		
	If necessary, you may attach an addendum to the application listing additional officers and	a/or aire	ctors.	
12	Signature of Director or Officer			
are true a	ter or director signing this document (and who is listed in number 11 above) affirms that the or she is aware that false information submitted in a document to the Departme egree felony as provided for in s.817.155, F.S.			
13				
	(Typed or printed name and capacity of person signing application)			



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

BAYLISS BROKERAGE, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, naving been incorporated on the 27th day of September, 2017, 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.

Certification# 105753908-1 Reference# 15653905- Page: 1 of 1 Perify this certificate online at http://www.sosnc.gov/verification IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 30th day of October, 2019.

Elaine I Marshall

Secretary of State