# Faccongs

| (Re                     | questor's Name)   |           |
|-------------------------|-------------------|-----------|
| (Ad                     | dress)            |           |
| (Ad                     | dress)            |           |
| (Cit                    | y/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT            | MAIL      |
| (Bu                     | siness Entity Nan | ·         |
| (Do                     | cument Number)    |           |
| <b>\</b>                | ,                 |           |
| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
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Office Use Only



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#### **COVER LETTER**

| _   | ion of Corporations   |                       |            |  |  |
|---|---|-----------------------|------------|--|--|
| SUBJECT:  | Peak Performance for Men F  | lampton Roads,        | , Inc.     |  |  |
| SODULCT.  | Name  | of corporation        | ı - must   | include suffix   |  |
| Dear Sir or M   | adam:   |                       |            |  |  |
| "Certificate o  | "Application by Foreign Conference," or "Certificate ced foreign corporation to the conference of the | of Good Star          | iding" a   | ind check are submitt  |  |
| Please return all correspondence concerning this matter to the following: |   |                       | 2021<br>SE |  |  |
| Kevin R. Pettre   | <sub>5</sub> y  |                       |            |  | 2020 HAY<br>SECHEL   |
|   |   | Name of               | Person     |  | ASS 2  |
| Peak Performa   | nce for Men Hampton Roads.  | Inc.                  |            |  | SPO P ITT  |
|   |   | Firm/Con              | npany      |  | 75 - 0   |
| 287 Independe   | nce Blvd., Suite 340  |                       |            |  | L: 37  |
|   |   | Addr                  | ess        |  | >  |
| Virginia Beach  | ı, VA 23462   |                       |            |  |  |
|   |   | City/State a          | ınd Zip    | code   |  |
| kevin@peakpe  | rformanceformen.org   |                       |            |  |  |
|   | E-mail addres   | s: (to be used        | for futu   | re annual report notif   | fication)  |
| For further in  | formation concerning this n   | natter, please        | call:      |  |  |
| Kevin R. Pettre   | ey  | 757<br>at (           | 532        | -8394<br>Daytime Telephone   |  |
| Nam   | e of Person   | Area Cod              | le /       | Daytime Telephone  | e Number   |
| Regis<br>Divis<br>The C<br>2415   | EET/COURIER ADDRES<br>stration Section<br>ion of Corporations<br>Centre of Tallahassee<br>N. Monroe Street, Suite 81<br>hassee, FL 32303  |                       |            | MAILING ADD<br>Registration Secti<br>Division of Corpo<br>P.O. Box 6327<br>Tallahassee, FL 3 | on<br>orations   |
|   | check for the following am<br>leck payable to: <b>FLORIDA D</b><br>ling Fee   | EPARTMENT  1g Fee & [ | □ \$78.7   |  | \$87.50 Filing Fee,<br>Certificate of Status &<br>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.

Deal, Darformana, for Man Harring Doods, Inc.

| ··   | ance for Metri Hampton Roaus, inc.                                       |                                       |                                      |              |  |
|--|--|---------------------------------------|--------------------------------------|--------------|--|
| ,  | orporation; must include "INCORPORATED," forp," "Inc," "Co," or "Corp.") | "COMPANY," "CORPORATION,              | •                                    |              |  |
|  |  |                                       |                                      |              |  |
| <del></del>  |  |                                       |                                      |              |  |
| (If name unavail   | able in Florida, enter alternate corporate name a                        | dopted for the purpose of transacting | business in Flo                      | rida)        |  |
| 2. Virginia  | 3.   | 83-1166004                            |                                      |              |  |
| (State or country under the law of which it is incorporated) |  | (FEI number, if app                   | (FEI number, if applicable)          |              |  |
| 4. 7/10/18   | 5.   |                                       |                                      |              |  |
| (Date of incorporation)                                      |  | (Date of duration, if other the       | nan perpetual)                       |              |  |
| 6.   |  | :                                     | 707<br>TAL                           |              |  |
|  | (Date first transacted business in                                       | , ,                                   | 2020 MAY 21<br>SECHETAN<br>SALLAHASS | -11          |  |
|  | (SEE SECTIONS 607.1501 & 607.15  |                                       | Y 2                                  |              |  |
| 7. 287 Independer  | nce Blvd., Suite 340, Virginia Beach, VA 23                              |                                       | <u> </u>                             | <del>.</del> |  |
|  | (Principa  | al office address)                    | PH 4: 3                              | Ö            |  |
|  |  | 13                                    | 0 F.                                 |              |  |
|  | (Current mailing   | g address, if different)              | DA I                                 |              |  |
| 8. Name and <u>stree</u>                                     | et address of Florida registered agent: (P.O                             | . Box <u>NOT</u> acceptable)          |                                      |              |  |
| Name:  | Northwest Registered Agent LLC   | _ <del></del>                         |                                      |              |  |
| Office Address:  | 7901 4th St N STE 300  |                                       |                                      |              |  |
|  | St. Petersburg   | , Florida <u>33702</u>                |                                      |              |  |
|  | (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.



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 Joseph D. Whitehead Name: \_ Name: \_\_\_\_\_ □ Chairman □ Chairman 615 Etheridge Road Address: ☐ Vice Chairman □Vice Chairman Address: \_\_\_\_\_ Chesapeake, VA 23322 Director □Director n President □President ☐ Vice President ☐ Vice President □Treasurer □ Secretary □Treasurer ☐ Secretary □Other \_\_\_\_\_ DOther \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: \_\_\_\_\_ ☐ Chairman Chairman Name: \_\_\_\_\_ □ Vice Chairman Address: \_\_\_\_\_ ☐ Vice Chairman Address: \_\_\_\_\_ Director □ Director President President □ Vice President \_\_\_\_\_ ☐ Vice President Treasurer □ Secretary □ Secretary □Other \_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_ □ Chairman □ Chairman Name: \_\_\_\_\_ Name: \_\_\_\_\_\_ □Vice Chairman Address: □ Vice Chairman Address: □ Director Director □ President □ President □ Vice President ☐ Vice President □ Secretary ☐Treasurer ☐ Secretary ☐ Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ □ Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Joseph D. Whitehead

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

# Commontrealth of Hirginia



## State Corporation Commission

#### CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That Peak Performance For Men Hampton Roads, Inc. is duly incorporated under law of the Commonwealth of Virginia.

That the corporation was incorporated on July 10, 2018;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

May 14, 2020

Joel H. Peck, Clerk of the Commission