(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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Mr Hay

COVER LETTER

Division of Corporations			
SUBJECT: Crimson Shipping Company, Inc.			
	ration - must include suffix		
Dear Sir or Madam:			
	n for Authorization to Transact Business in Florida," I Standing" and check are submitted to register the usiness in Florida.		
Please return all correspondence concerning this n	natter to the following:		
Lance A. Terry			
Nan	ne of Person		
Cooper/T. Smith			
Firm	/Company		
P.O. Box 1566			
	Address		
Mobile, AL 36633	<u> </u>		
City/S	tate and Zip code		
tax.dept@coopertsmith.com			
E-mail address: (to be i	used for future annual report notification)		
For further information concerning this matter, ple	ease call:		
Lance A. Terry 251 431-6100			
Name of Person at (Code Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTM \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee,		

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.

Crimson Shippi	ng Company, Inc.			
	corporation; must include "INCORPORATED Corp." "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in	Florida)	
2 Alabama		32-0637634		
(State or countr 08/03/2020	ry under the law of which it is incorporated) 5	(FEI number, if applicable)		
(Date of incorporation)		(Date of duration, if other than perpetual)	
6. 02/01/2021				
7. 150 Viaduet Rd.	Chickasaw, AL 36611	502, F.S., to determine penalty liability) lice <u>street</u> address)		
P.O. Box 1566, ?	Mobile AL 36633		<u>~3</u>	
	(Current maili	ng address, if different)		
8. Name and <u>stree</u> Name:	et address of Florida registered agent: (P. CT Corporation System	O. Box <u>NOT</u> acceptable)	.—	
Office Address:	1200 S. 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.

James M. Halpin

<u>Assistant Secretary</u>

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.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

A. DIRECTORS						
□Chairman	Name: Stephen S. Reed	□Chairman	Name: Jamie K. Davidson			
□Vice Chairman	Address:	□Vice Chairman	Address: 118 N Royal Street			
□Director	Chickasaw, AL 36611	□Director	Mobile, AL 36602			
■ President		□President				
□Vice President		■Vice President				
Secretary	Treasurer	Secretary	Treasurer			
□Other	Other	□Other	Other			
	Alan W. Weatherford		Susan D. Bates			
□Chairman _	Name: 150 Viaduct Rd	□Chairman	Address:			
	Address: Chickasaw, AL 36611	□Vice Chairman	Address: Mobile, AL 36602			
□Director		□Director				
□President		□President				
■ Vice President		□ Vice President				
Secretary	□Treasurer	■ Secretary	□Treasurer			
□Other	Other	□Other	Other			
			*23			
□ Chairman	Name:	□ Chairman	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.						
12	Susan D. Exte	<u> </u>				
Signature of Director or Officer						
	ctor signing this document (and who is listed in numbe alse information submitted in a document to the Depart					
13		ereby				
(Typed or printed name and capacity of person signing application)						

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Crimson Shipping Company, Inc. was formed in Alabama, Alabama on August 3, 2020. The Alabama Entity Identification number for this entity is 641-498. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20210407000022654

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

04/07/2021

Date

J. H. Menill

John H. Merrill

Secretary of State