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(Re	equestor's Name)			
(Ac	ldress)			
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(Cit	ty/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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'JUN 17 2021 M. SOLOMON

COVER LETTER

	stration Section sion of Corporations			
SUBJECT:	The Hendrix Corporation			
0000000	Name	e of corporation -	must include suffix	
Dear Sir or M	ladam:			
"Certificate of		te of Good Standi	uthorization to Transact Busing" and check are submitted in Florida.	
Please return	all correspondence concer	ning this matter to	the following:	
Jason Hendrix				
		Name of Pe	erson	
The Hendrix (Corporation			
		Firm/Compa	any	. 22
59 Lake Park	CV			2021 JUH - 3
		Address	3	\$ S
Santa Rosa Bo	each, FL 32459			<u> </u>
		City/State and	Zip code	
JASON.HENI	DRIX@HENDRIXCORP.CC			新
	E-mail addre	ss: (to be used for	future annual report notific	cation) 5 S
For further in	formation concerning this	matter, please cal	I :	
Jason Hendrix		at (205	789-8416)	
Nam	e of Person	Area Code	Daytime Telephone	Number
Regis Divis The (2415	EET/COURIER ADDRESTRATION Section of Corporations Centre of Tallahassee N. Monroe Street, Suite 8 hassee, FL 32303		MAILING ADDR Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	1 ations
	check for the following an neck payable to: FLORIDA I ing Fee	DEPARTMENT O		\$87.50 Filing Fee, Certificate of Status & 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.

	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.")	O," "COMPANY," "CORPORATION,"	
The Hendrix Co	rporation Santa Rosa Beach		
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in	Florida)
Alabama	3	46-2771986	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
5/16/2013	•	5.	
(Date	of incorporation)	(Date of duration, if other than perpetua	1)
6/1/2	o 2 (
		in Florida, if prior to registration)	
	•	1502, F.S., to determine penalty liability)	
59 Lake Park CV	, Santa Rosa Beach, FL 32459		
	(Principal o	ffice street address)	
	(Current mail	ing address, if different)	7 - 3a
			5 3-
Name and stree	et address of Florida registered agent: (P	.O. Box NOT acceptable)	22
Name:	Jason Hendrix		- 7 '''
CC Add	59 Lake Park CV		
ffice Address:			
ince Address:	Santa Rosa Beach	, Florida 32459	

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. 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	•					
□Chairman	Name: Jason Hendrix	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	Santa Rosa Beach, FL 32459	□Director				
President	 	President				
□Vice President		□Vice President				
☐ Secretary	Treasurer	□Secretary		□Treasurer		
□Other	Other	□Other		□Other		
□Chairman	Name:	☐ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
Director		□Director				
□President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	Secretary		□Treasurér , 🏖		
Other	Other	Other				
□ Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:	<u> </u>		
□Director		□Director		75. 15.		
□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. 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.

3 Jason Hendrix, President

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 The Hendrix Corporation was formed in Shelby County, Alabama on May 16, 2013. The Alabama Entity Identification number for this entity is 283-060. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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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.

05/30/2021

Date

X 2. Menill

John H. Merrill

Secretary of State