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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

FOREIGN PROFIT/NONPROFIT CORPORATION WACCO, INC.

| Certificate of Status | 0 |
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| Certified Copy | 1 |
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Help

To: 18506176383 Page: 3 of 5 2021-06-18 10:00:06 CST 16144554862 From: James Tanks III

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.

| WACCO, II | | | |
|---|--|---|---------------------------------------|
| | of corporation; must include "INCORPORATED," "C ""Corp," "Inc," "Co," or "Corp") | COMPANY," "CORPORATION," | |
| (If name una | vailable in Florida, enter alternate corporate name ado | oted for the purpose of transacting b | usiness in Florida) |
| South Card | ilina 3 5 | 7-0483547 | |
| (State or con | (State or country under the law of which it is incorporated) (FEI number of the law of which it is incorporated) | | able) |
| 09/06/1966 4. | 5. | | |
| (1 | Date of incorporation) 5 | (Date of duration, if other than | n perpetual) |
| 6 | | | |
| | (Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502, | | 2021 |
| 7. <u>PO Box 6</u> | 307 Spartanburg SC 29304 | | |
| | (Principal c | ffice address) | 2021 JUN 18 |
| 8. Name and <u>s</u> | (Current mailing a treet address of Florida registered agent: (P.O. E | ddress, if different) Box NOT acceptable) | 18 AH II: 03 |
| Name | C T Corporation System | | ; • |
| Office Address | 1200 South Pine Island Road | _ | |
| | Plantation, | | |
| | (City) | (Zip code) | |
| Having been n designated in t further agree t | agent's acceptance: named as registered agent and to accept service of this application, I hereby accept the appointment to comply with the provisions of all statutes rela in familiar with and accept the obligations of m | t as registered agent and agree tive to the proper and complete | to act in this capacity. T |
| | By: (Kegistered ager | Christini VOIL | Christine Kelm Assistant Secretary |

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

| A. DIRE | CTORS | | | |
|------------|---|-------------|-----------------------|--------------|
| Chairman | | · | | |
| Address | | | | |
| _ | | | | |
| Vice Chan | man. | | · | - |
| Address | | | <u></u> | |
| _ | | | | |
| Director: | | | | |
| Address: | | | | |
| | | | | |
| Director: | | | | |
| Address: | | | | |
| | | | | |
| B. OFFI | CERS | | 2021 | |
| President. | Stan Williams | | c | <u>.::44</u> |
| Address: | 660 Norwood Street Spartanburg SC 29302 | 74.5 | H | .≒ } |
| | | <i>in</i> | ∞ -> | <u> </u> |
| Vice Presi | Jerry D Koon dent: | 70 171, | A | (15) |
| | 105 Notchwoods Drive Boiling Springs SC 29316 | 通 | <u></u> | |
| | | | | |
| Secretary. | Lynn Koon | | | |
| Address | 105 Notchwoods Drive Boiling Springs SC 29316 | | | |
| Treasurer: | | | | |
| Address | | | | |
| NOTE: | If necessary, you may attach an addendum to the application listing additional officers a | nd/or dire | ctors. | |
| | Lyna Koon | | | |
| | Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that | the facts o | trated h | erein |
| are true a | nd that he or she is aware that false information submitted in a document to the Departm | ient of Sta | te consi | titutes |
| a inira de | gree felony as provided for in s.817.155, F.S. Lynn Koon — Controller/Secretary — — — — — — — — — — — — — — — — — — — | | | |

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

To: 18506176383 • Page: 5 of 5 2021-06-18 10:00:06 CST 16144554862 From: James Tanks III

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

WACCO, INC., a corporation duly organized under the laws of the State of South Carolina on September 6th, 1966, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 17th day of June, 2021.

Mark Hammond: Secretary of State