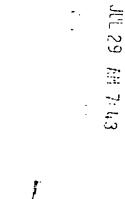
# F21000004289

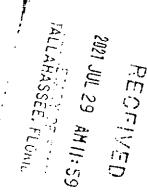
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(Ad	dress)	
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(Cit	y/State/Zip/Phone	
(0.0	y/State/2/p// Helio	,
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(Bu	siness Entity Name	e)
	ocument Number)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



800369284738





 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 931086 7974866

AUTHORIZATION : CTAR Lacenson

COST LIMIT : \$ 40.00

ORDER DATE : July 27, 2021

ORDER TIME : 8:38 AM

ORDER NO. : 931086-005

CUSTOMER NO: 7974866

\_\_\_\_\_

#### FOREIGN FILINGS

NAME: EMJ CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER:

## **COVER LETTER**

	stration Section ion of Corporations			
SUBJECT:	EMJ Corporation			
	Name (	of corporation -	must include suffix	
Dear Sir or M	adam:			
"Certificate o	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to to	of Good Stand	ing" and check are sub-	
Please return	all correspondence concerni	ng this matter t	o the following:	
J. Colby Cox				
		Name of P	erson	
EMJ Corporati	ion			
		Firm/Comp	any	· · · · ·
2034 Hamilton	Place Blvd., Suite 400			
	<del></del> -	Addres	s	- · · · · · · · · · · · · · · · · · · ·
Chattanooga, T	ΓN 37421			
		City/State and	d Zip code	· · · · · · · · · · · · · · · · · · ·
legal@emjcorp	o.com			
	E-mail address	: (to be used fo	r future annual report n	otification)
For further in	formation concerning this m	atter, please ca	H:	
Lorrie Jordan		at (	582-3442	
Namo	e of Person	Area Code	Daytime Telepl	hone Number
Regis Divisi The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
	check for the following amo eck payable to: FLORIDA DF ng Fee	EPARTMENT ( g Fee & 🔻 🖺	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 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.

EMJ Corporation	orporation; must include "INCORPORATED,"	"COMPANY." "CORPORATION."	
	orp," "Inc," "Co," or "Corp.")		
	able in Florida, enter alternate corporate name ad	. , ,	
	$\frac{3}{8}$ y under the law of which it is incorporated)	6-1418134 	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
Tennessee	5		
(Date of incorporation) 5.		(Date of duration, if other than perpetual)	
Upon Filing			
2024 Unwillean D	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		
2034 Hamilton P	lace Blvd., Suite 400, Chattanooga, TN 37421		
	(Principal office	street address)	
	(Current mailing	address, if different)	
			17.
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Corporation Service Company		
ffice Address:	1201 Hays Street	_	<b>新</b>
	Tallahassee	, Florida 32301	7:43 ·
	(City)	(Zip code)	ت. نت

#### 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.

Corporation Service Company

By: Wilm Jassistan + va president

(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 J. Colby Cox Name: Jack Bowen Name: □ Chairman □ Chairman 2034 Hamilton Place Blvd. 2034 Hamilton Place Blvd. □Vice Chairman Address: □ Vice Chairman Address: Suite 400 Suite 400 Director □ Director Chattanooga, TN 37421 Chattanooga, TN 37421 President □ President □Vice President \_ ☐ Vice President ☐ Secretary ☐Treasurer ■ Secretary ☐ Treasurer □Other \_\_\_\_ □Other Other Other Holly Bischoff □ Chairman □ Chairman Name: 2034 Hamilton Place Blvd. □Vice Chairman Address: □Vice Chairman Address: \_\_\_\_\_ Suite 400 □Director □ Director Chattanooga, TN 37421 □ President □President □Vice President \_\_\_\_\_ □Vice President ☐ Treasurer ☐ Secretary Treasurer □ Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other\_\_\_\_ ☐ Other \_\_\_\_\_\_ □ Chairman Chairman □Vice Chairman Address: \_\_\_\_\_ ☐ Vice Chairman Address: □ Director □ Director □ President □ President □Vice President □ Vice President ☐ Secretary □Treasurer □ Secretary □ Treasurer □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

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 of 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.

J. Colby Cox, Corporate Secretary and General Counsel



## **Division of Business Services Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

**ERICA WILSON** 

July 28, 2021

**ERICA WILSON** 251 LITTLE FALLS DRIVE WILMINGTON, DE 19808

Request Type: Certificate of Existence/Authorization

Issuance Date: 07/28/2021

Request #:

0428795

Copies Requested:

Receipt #: 006534929

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3811276421

**Document Receipt** 

\$20.00

Regarding:

**EMJ** Corporation

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 01/07/2021

Status:

Active

**Duration Term:** 

Perpetual

Business County: HAMILTON COUNTY

Control #:

1157490

Date Formed:

01/07/2021

Formation Locale: TENNESSEE

Inactive Date:

#### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

#### **EMJ** Corporation

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User

Verification #: 047711023