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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Fax Number : (954)208-0845

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## FOREIGN PROFIT/NONPROFIT CORPORATION ENVIRONMENTAL FIELD SERVICES INC

| Certificate of Status | 0       |
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# 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 "INCORP<br>orp," "Inc," "Co," or "Corp,")  | ORATED," "  | COMPANY," "CORPORATION   | \$. <sup>15</sup>  |
|--|---|---|--|--|
| Enviro F S Inc.                                    |   |   |  |  |
| (If name unavail                                   | able in Florida, enter alternate corpo  | orate name ado  | pted for the purpose of transactin   | g business in Florida)   |
| MS   | •   | 3 82  | -4814878   | · · ·  |
|  | y under the law of which it is incorp   |   | (FEI number, if ap   |  |
| (Date  | of incorporation)   | <del></del>   | (Date of duration, if other  | than perpetual) .  |
| upon filing  |   |   |  |  |
|  | (SEE SECTIONS 607.150<br>ay Springs, Ms 39422   | 1 & 607.1502.   | orida, if prior to registration)<br>F.S., to determine penalty liabili                                 | (v)  |
| •  | y Springs, MS 39422   | (Principal o  | office address)  | 4  |
| · · · · · · · · · · · · · · · · · · ·              | (Cu   | rrent mailing a   | ddress, if different)  |  |
| Name:  | t address of Florida registered a C T Corporation System  1200 South Pine Island Road   | gent: (P.O. E   | Box <u>NOT</u> acceptable)<br>   | 1021 JUL 29 AM<br>SELAETAAY OF<br>TALL YYNSSE                          |
| ffice Address:                                     | Plantation,   | •   | 33324  | mo G   |
| ince Address:                                      | · iamanon,  |   | , Florida  |  |
| thee Address:                                      | (City)  |   | Florida<br>(Zip code)  | AM 9:34  |
| aving been namesignated in this orther agree to co | (City) int's acceptance: ed as registered agent and to ac<br>application, I hereby accept the<br>omply with the provisions of all<br>amiliar with and accept the obli | e appointmen<br>statutes rela-<br>igations of m<br>ation System | (Zip code)  of process for the above stated tas registered agent and agritive to the proper and comple | d corporation at the<br>see to act in this capa<br>to performance of m |

Page: 4 of 5

| II. Nan    | nes and business addresses of officers and/or directors:   | •   |
|------------|--|---|
| A. DIR     | ECTORS   | •   |
| Chairman   | Brendan Sartin   | •   |
| Address:   | 44 Fifth Street  | •   |
|            | Bay Springs, Ms. 39422   | ·   |
|            |  |   |
| Vice Cha   | irman:   | <del>'</del>                                  |
| Address:   | ·  |   |
|            |  | 41.   |
| Director:  |  |   |
|            | ·  |   |
|            | ·  | <del></del>                                   |
| Director   |  | . <u>.                                   </u> |
|            |  | -   |
| Address:   |  | ·   |
|            |  |   |
| B. OFF     | ICERS  | •   |
| resident:  | Brendan Surtin   | •   |
|            | 44 Fifth Street  |   |
|            | Bay Springs MS 39422   | · · · · · · · · · · · · · · · · · · ·         |
| Vîne Presi | Bramon Dyess   | <del></del>                                   |
|            | 44 Fifth Street  |   |
| ruutess.   | Bay Springs MS 39422   | •   |
|            | Willie Bounds  |   |
| Secretary: | 44 Fifth Street, Bay Springs MS 39422  | •   |
| \ddress:   |  |   |
| Freasurer: |  |   |
| Address:   |  | <del></del>                                   |
| OTE:       | If necessary, you may attach an addendum to the application listing additional officers and/or director  | rs.   |
| 2. 4/-     | Millie Bounds. Secretary   |   |
|            | Signature of Director or Officer   | -   |
| ire true a | er or director signing this document (and who is listed in number 11 above) affirms that the facts stand<br>and that he or she is aware that false information submitted in a document to the Department of State of<br>the gree felony as provided for in s.817.155, F.S. | ed herein<br>constitutes                      |
|            | e Bounds, Secretary  |   |
|            | (Typed or printed name and capacity of person signing application)   |   |



### Office of the Secretary of State Jackson, Mississippi

# Certificate of Good Standing

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by the laws of Mississippi, to be tiled in my office, do hereby certify:

That on the 16th day of March, 2018, the State of Mississippi issued a Charter/ Certificate of Authority to:

#### ENVIRONMENTAL FIELD SERVICES INC

That the state of incorporation is Mississippi.

That the period of duration is perpetual.

That according to the records of this office. Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

That insofar as the records of this office are concerned, the said Environmental Field Services lie is in good standing at this time.

Given under my hand and seal of office the 29th day of July, 2021

Certificate Number: CN21116667

Verify this certificate online at http://corp.sos.ms.gov/corpcony/verifycertificate.aspx