# P21000006567

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S. FRANKLIN NOV 1 6 2021

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
cem	W/R	IT Inc.
SUBJ	Name of corpora	ion - must include suffix
<b>D</b> (		
Dear S	Sir or Madam:	
"Certi	nclosed "Application by Foreign Corporation ficate of Existence," or "Certificate of Good Streferenced foreign corporation to transact bus	for Authorization to Transact Business in Florida," standing" and check are submitted to register the siness in Florida.
Please	return all correspondence concerning this ma	tter to the following:
	Caro	WAlker
	Name	of Person
	WRIT, I	Inc.
	Firm/C	Company
	37 E BAYOU FO	Vest DR. 為有可
	A	ddress
	Freeport	
	City/Sta	te and Zip code
	C. Walke	remindspring. com
	E-mail address: (to be us	te and Zip code  (Conind Spring Continue annual report notification)
For fu	rther information concerning this matter, plea	
(	Cavol WAlker at (67) Name of Person Area	8, 523-1042
	Name of Person Area C	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
	sed is a check for the following amount: make check payable to: FLORIDA DEPARTM!	ENT OF STATE
. /	0.00 Filing Fee	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee.  Certified Copy 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. WRIT, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. <u>Ga/USA</u>
(State or country under the law of which it is incorporated)

(FEI number, if applicable) 4. 12/06/05 5. (Date of incorporation) 5. (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine permission of the second of the (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 37 E BAYOU FOLEST Dr.

Free port . Florida 32439

(City) (Zip code) Office Address: 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. Carol Walker 10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS			70		
Chairman	Name: Carol WAlker	□Chairman	Name: SMatthew Scott  Address: 912 Grandview Walker  Address: 912 Grandview WAY  Acwarth, 5a. 30101		
□Vice Chairman	Address: 912 Grandview WAY Accookth, Ga. 30101	□Vice Chairman	Address: 912 Grandview Way		
□Director	Acworth, Ga. 30101	Director	1+ cwarth, 6a. 30101		
□President		□President			
□ Vice President		□Vice President			
Secretary	□Treasurer	Secretary	☐Treasurer		
Other	<i>F</i> 0 □Other	□Other	Other		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President	· · · · · · · · · · · · · · · · · · ·		
☐ Secretary	□Treasurer	☐ Secretary	Treasurer 5		
Other	Other	Other	Other 1 00 t		
□Chairman □Vice Chairman □Director	Name:	□Chairman □Vice Chairman □Director	Name: PA 55  Address: FG 5		
□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					
12Signature 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.					
13. (Typed or printed name and capacity of person signing application)					

Control Number: 0581300

### STATE OF GEORGIA

#### Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the my office that

# WRIT, INC. a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 22044891 Date Inc/Auth/Filed : 12/06/2005 Jurnsdiction : Georgia Print Date : 10/25/2021

Form Number : 211

Brad Raffonsperger

Brad Raffersperger



