# F22000000 (168

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SECRETARY OF STATE

## **COVER LETTER**

TO:	Registration Sec Division of Cor					
SUBJ	ECT: A.C. Moo	ore Transport Inc.				
	<del></del>		f corporation	ı - must i	nclude suffix	
Dear S	Sir or Madam:					
"Certif	ficate of Existence		of Good Star	nding" an	d check are subi	et Business in Florida," mitted to register the
Please	return all corresp	ondence concernin	g this matte	r to the fo	ollowing;	
Andrey	w Moore	·	, <u>,</u>			
			Name of	Person		
<u>A.C. N</u>	100re Transport Inc	·.				
			Firm/Cor	npany		
204 Ra	iptor Rd					
			Addr	ess	<del></del>	
<i>(</i> 2)	. 13					
Cresty	iew, Florida 32536		City/State a	and Zin co		
	_		Chymanc i	ina zap ci		
acmoo	retransport@gmail.	.com E-mail address:	(to be used	for future	e annual report n	otification)
						- · · · · · · · · · · · · · · · · · · ·
For fu	rther information	concerning this ma	tter, please	call;		
Andrey	w Moore Name of Person		at ( <u>513</u> ) <u>704</u> Area Code			
	Name of Person	II	Area Coc	ie	Dayume Telepi	ione Number
	Registration Sec Division of Cor The Centre of T	porations fallahassee e Street, Suite 810	:		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
Please		the following amore to: FLORIDA DE  S78.75 Filing Certificate of	PARTMENT Fee &	□ \$78.75	ATE Filing Fee & ed Copy	\$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.

	<pre>insport Inc. orporation: must include "INCORPORATE orp." "Inc." "Co," or "Corp.")</pre>	D."	"COMPANY." "CORPORATION."		_		
(If name unavail	able in Florida, enter alternate corporate nar	ne ac	dopted for the purpose of transacting business in	ı Florida	<del>-</del> )		
2. Ohio	Ohio 3.		87-0883572				
(State or countr	y under the law of which it is incorporated)	_	(FEI number, if applicable)				
1. 5/22/2021		5.					
(Date	of incorporation)	_	(Date of duration, if other than perpetua	al)	_		
Ď.							
			Florida, if prior to registration) 12, F.S., to determine penalty liability)				
7. <u>3884 Winter Hill</u>	Drive, Hamilton, Ohio 45011 (Principal)	offic	e street address)		_		
204 Raptor Drive	e. Crestview, Florida 32536	01.10	, street address,				
		iling	address, if different)		-		
3. Name and <u>stree</u>	et address of Florida registered agent: (	P.O.	AS A	2027			
Name:	Andrew Moore			33.	1		
Office Address:	204 Raptor Drive		— LAHASSE E	2022 FEB 14 PM 5: 4			
	Crestview		, Florida <u>32536</u>	무	ĺ		
	(City)		(Zip code)	ر ا	(		
) Registered age	ent's acceptance:		22. 	315			

9. Registered agent's acceptance: 500 G. 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: Andrew Moore □Chairman Name: □Vice Chairman Address: 204 Raptor Drive ☐ Vice Chairman Address: Crestview, Florida 32536 Director Director President □President □Vice President \_\_\_\_\_ □ Vice President ☐ Secretary □Treasurer □Treasurer ☐ Secretary □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 ☐ Treasurer □Other \_\_\_\_\_ \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ □ Chairman Name: \_\_\_\_\_ □ Chairman □Vice Chairman Address: ☐ Vice Chairman Address: □ Director □ Director □ 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.

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.

13. Andrew Moore, President

## UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show A.C. MOORE TRANSPORT INC., an Ohio corporation, Charter No. 4681058, having its principal location in Fairfield Twp, County of Butler, was incorporated on May 22, 2021 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 8th day of February, A.D. 2022.

& Joban

**Ohio Secretary of State** 

Validation Number: 202203905334