F2200000 7709

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



700385701267

04/18/22-+01041--008 *#70.00

FILED

2022 APR 18 PM 4: 15

SECRETARE PER STATE

COVER LETTER

TO: Registration Section Division of Corporation				
SUBJECT: The Plateau C	Group, Inc.			
<u> </u>		1 - must include suffix		
Dear Sir or Madam:				
"Certificate of Existence,"	by Foreign Corporation for or "Certificate of Good Star orporation to transact business."	nding" and check are sub		
Please return all correspon	dence concerning this matter	r to the following:		
Steven C. Douglas				
	Name of	Person		
The Plateau Group, Inc.				
	Firm/Con	npany		
PO Box 7001				
	Addr	ress		
Crossville, TN 38557-7001				
	City/State a	and Zip code		
tracy.graham@800plateau.co				
	E-mail address: (to be used	for future annual report r	otification)	
For further information col	ncerning this matter, please	call:		
Steven C. Douglas	931 at (459-3104	59-3104 Daytime Telephone Number	
Name of Person	Area Cod	le Daytime Telep	hone Number	
STREET/COURI Registration Section Division of Corpor The Centre of Tall 2415 N. Monroe S Tallahassee, FL 3	on rations ahassee treet, Suite 810	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	
	: FLORIDA DEPARTMENT	T OF STATE ☐ \$78.75 Filing Fee & Certified 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.

	orporation: must include "INCORPORATED."	"COMPANY," "CORPORATION	4."
'Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")		
(If name unavail:	able in Florida, enter alternate corporate name ac	dopted for the purpose of transactin	g business in Florida)
		62-1103416	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
July 29, 1980	5		
(Date	of incorporation)	(Date of duration, if other than perpetual)	
NA			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		ty)
2701 North Main	Street, Crossville, TN 38555		
	(Principal offic	e street address)	- -
	•		
PO Box 7001, Ci	ossville, TN 38557-7001		
PO Box 7001, Ci	rossville, TN 38557-7001	address, if different)	
PO Box 7001, Ci	rossville, TN 38557-7001	address, if different)	
	rossville, TN 38557-7001		
	cossville, TN 38557-7001 (Current mailing		201 TA
Name and stree	(Current mailing et address of Florida registered agent: (P.O.		2022 APF SECRE TALL AH
Name and stree	(Current mailing et address of Florida registered agent: (P.O. CT Corporation System	Box NOT acceptable)	2022 APR 18 SECRETAIN TALL AHASS
Name and stree	(Current mailing et address of Florida registered agent: (P.O. CT Corporation System 1200 South Pine Island Road		SS - 8
Name and <u>stree</u> Name: ffice Address:	(Current mailing et address of Florida registered agent: (P.O. CT Corporation System 1200 South Pine Island Road Plantation (City)	Box NOT acceptable) , Florida 33324	SECHE TALL AHASSLE FL
Name and stree Name: Tice Address: Registered againg been name	(Current mailing et address of Florida registered agent: (P.O. CT Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: ied as registered agent and to accept service.	Box NOT acceptable) , Florida 33324(Zip code) e of process for the above stated	SSEE. FLOOr at the
Name and street Name: Tice Address: Registered agaiving been names signated in this	(Current mailing et address of Florida registered agent: (P.O. CT Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: the das registered agent and to accept services application. I hereby accept the appointment	Box NOT acceptable) , Florida \(\frac{33324}{(\text{Zip code})}\) e of process for the above stated ent as registered agent and agree.	SSEE, FLOOR at the ce to act in This can
Name and stree Name: ffice Address: Registered agaving been namesignated in this rther agree to c	(Current mailing et address of Florida registered agent: (P.O. CT Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes re	Box NOT acceptable) , Florida 33324, [Zip code) e of process for the above stated agent as registered agent and agrelative to the proper and complete.	SSEE, FLOOR at the ce to act in This can
Name and stree Name: ffice Address: Registered agaving been namesignated in this orther agree to c	(Current mailing et address of Florida registered agent: (P.O. CT Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: the das registered agent and to accept services application. I hereby accept the appointment	Box NOT acceptable) , Florida 33324, [Zip code) e of process for the above stated agent as registered agent and agrelative to the proper and complete.	SSEE, FLOOR at the ce to act in This can
Name and stree Name: ffice Address: Registered agaving been namesignated in this arther agree to c	(Current mailing et address of Florida registered agent: (P.O. CT Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes re	Box NOT acceptable) , Florida 33324, [Zip code) e of process for the above stated agent as registered agent and agrelative to the proper and complete.	SSEE, FLOOR at the ce to act in This can

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:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address: PO Box 7001			
□Director	Crossville, TN 38557-7001	Director	Crossville, TN 38557-7001			
President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	☐ Secretary	Treasurer			
□Other	Other	Other Sr. VP	□Other			
□Chairman	Name:	□Chairman	Name: William Michael Ramsey			
□Vice Chairman	PO Box 7001	□Vice Chairman	Address: PO Box 7001			
□ Director	Crossville, TN 38557-7001	■ Director	Crossville, TN 38557-7001			
□President		□President				
□Vice President		□Vice President				
■ Secretary	□Treasurer	☐ Secretary	■ Treasurer			
□Other	□Other	□Other	Other			
□Chairman	Cynthia J. Starrett	□Chairman	Name:			
	PO Box 7001 Address:	□Vice Chairman	PO Box 7001			
Director	Crossville, TN 38557-7001	Director	Crossville, TN 38557-7001			
□President		□President				
□Vice President		□Vice President				
☐ Secretary	☐Treasurer	Secretary	□Treasurer			
CFO CFO	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. 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.						
Joseph Melendez, President/Director						



Division of Business Services Department of State

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

THE PLATEAU GROUP, INC.

STEVEN C. DOUGLAS

PO BOX 7001

CROSSVILLE, TN 38557-7001

Request Type: Certificate of Existence/Authorization

Request #:

0467060

Issuance Date: 03/23/2022

Copies Requested:

March 23, 2022

Document Receipt

Receipt #: 007061160

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3825846920

\$20.00

Regarding:

THE PLATEAU GROUP, INC.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 07/29/1980

Status:

Active

Duration Term:

Perpetual

Business County: CUMBERLAND COUNTY

Control #:

94657

Date Formed:

07/29/1980

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

THE PLATEAU GROUP, INC.

- * 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 filed the most recent annual report required with this office;
- * 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 #: 052615614