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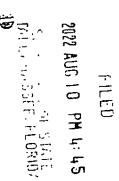
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PICK-UP WAIT MAIL
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T. LEMIEUX **AUG 1 5 2022**

COVER LETTER

		stration Section ion of Corporati	ons							
		Harris Diversifi		ic.						
	SUBJECT: Name of corporation - must include suffix									
	Dear Sir or Madam:									
	The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.									
	Please return all correspondence concerning this matter to the following: Charles I. Pollack, Esq.									
	Name of Person Fryer, Shuster, Lester & Pollack, P.C.									
	Firm/Company 1050 Crown Pointe Parkway, Suite 410									
	Address Atlanta, Georgia 30338									
	City/State and Zip code cpollack@galegal.com									
	E-mail address: (to be used for future annual report notification)									
	For further information concerning this matter, please call:									
Charles I. P	Pollack, on beha	alf of Fryer, Shust	ter, Lester &			770-668-9300				
	Nam	e of Person		Area Code	e	Daytime Telepho	one Number			
	Regis Divis The G 2415	EET/COURIER stration Section sion of Corporati Centre of Tallaha N. Monroe Stree hassee, FL 3230	ons assec et, Suite 810			MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations			
		~		ARTMENT Fee &	\$78.73	ATE 5 Filing Fee & ied 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.

Harris Diversifi 1.	ed Services, Inc.			
(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATIO	N,"	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacti	ng business in Florida)	
Georgia	3	58-2025451		
	y under the law of which it is incorporated)	(FEI number, if applicable)		
3/19/1996 1.	5	Perpetual		
	of incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1 reet, Suite 200, Canton, Georgia 30114	n Florida, if prior to registration) 502, F.S., to determine penalty liabil	lity)	
/	(Principal off	ice street address)		
	(C	ng address, if different)		
	(Current main:	ng address, it different)		
8. Name and stree	et address of Florida registered agent: (P.C	O. Box NOT acceptable)		
Name:	InCorp Services, Inc.			
Name.	10788 67th Court North		202	
Office Address:			2	
	Loxahatchee	33470 , Florida	5 3	
	(City)	(Zip code)	- SSE	
Having been nam	ent's acceptance: ed as registered agent and to accept serv			
further agree to c	application, I hereby accept the appoints omply with the provisions of all statutes with and accept the obligations of my positions.	relative to the proper and comple	ete performance of hy dutie	
	Registered agent's s	sabel Burgos on behalf of Incorp	Services, Inc.	
	(Registered agent's s	ignature)		
10. Attached is a	certificate of existence duly authenticated	, not more than 90 days prior to d	delivery of this application to	

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

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

A. DIRECTORS							
■ Chairman Name:	□Chairman	Name:					
□Vice Chairman Address:	□ Vice Chairman	Address:					
792 White Rock Trail ■ Director	□Director						
Suwanee, Georgia 30024	□President						
□Vice President	□ Vice President						
□Secretary □Treasurer	□Secretary	□Treasurer					
□Other	□Other	Other					
□Chairman Name: Scott D. Harris	□Chairman	Name:					
□Vice Chairman Address:	□Vice Chairman	Address:					
■Director 231 W. Main Street	□Director						
□President Canton, Georgia 30114	President						
■ Vice President	□Vice President						
■ Secretary □ Treasurer	Secretary	□Treasurer					
□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					
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. Don J. Harris. President							

Control Number: K300107

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 seaf of my office that

HARRIS DIVERSIFIED SERVICES, 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 : 23336104 Date Inc/Auth/Filed: 12/28/1992 Jurisdiction : Georgia Print Date : 08/04/2022

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State