

F220000005164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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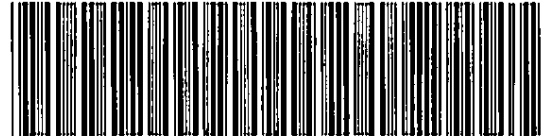
(Business Entity Name)

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S. ROBERTS

AUG 15 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: de maximis Data Management Solutions, inc (former document number F18000003126)

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:

Major Sharpe

Name of Person

de maximis Data Management Solutions, inc

Firm/Company

450 Montbrook Lane

Address

Knoxville, TN 37919

City/State and Zip code

MSharpe@ddmsinc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gwendolyn Wilkinson

at (865) 691-5052

Name of Person

Area 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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$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.*

1. de maximis data management solutions, 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. Tennessee 3. 20-3803802
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/13/2006 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 8/17/2022
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3380 Fred George Road, Apt.: 316 Tallahassee, FL 32303
(Principal office street address)

450 Montbrook Lane, Knoxville, TN 37919

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Kalauna Carter

Office Address: 3380 Fred George Road, Apt 316

Tallahassee . Florida 32303
(City) (Zip code)

2022 AUG 15 PM 1:48
TALLAHASSEE, FL

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.

Kalauna R. Carter
Kalauna R. Carter (Aug 9, 2022 12:35 EDT)

(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.

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

A. DIRECTORS

☐ Chairman Name: Mark Packard
☐ Vice Chairman Address: 120 Hudson Drive
☐ Director North Hudson, WI 54106
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: R. Major Sharpe
☐ Vice Chairman Address: 450 Montbrook Lane
☐ Director Knoxville, TN 37919
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☒ Other CFO ☐ Other _____

☐ Chairman Name: Jack Keener
☐ Vice Chairman Address: 1322 Scott Street Suite 104
☒ Director San Diego, CA 92106
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: John Dustman
☐ Vice Chairman Address: 2610 Abbey Hill Drive
☒ Director Minneapolis, MN 55305
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ 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.

13. R. Major Sharpe, Secretary, CFO
(Typed or printed name and capacity of person signing application)



Tre Hargett
Secretary of State

Division of Business Services

Department of State

State of Tennessee

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

JACOB OWENS
450 MONTBROOK LN
KNOXVILLE, TN 37919

July 29, 2022

Request Type: Certificate of Existence/Authorization
Request #: 0487598

Issuance Date: 07/29/2022
Copies Requested: 1

Document Receipt

Receipt #: 007411739

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3833461298

\$20.00

Regarding: DE MAXIMIS DATA MANAGEMENT SOLUTIONS, INC.

Filing Type: For-profit Corporation - Domestic

Control #: 510910

Formation/Qualification Date: 01/13/2006

Date Formed: 01/13/2006

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: KNOX COUNTY

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

DE MAXIMIS DATA MANAGEMENT SOLUTIONS, 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.

Tre Hargett
Secretary of State

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