Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000388505 3)))



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|--|-----------------|
| Doing so will generate another cover sheet.                | •               |

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099

: (813)932-5244 Fax Number : (813)932-3782

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## FOREIGN PROFIT/NONPROFIT CORPORATION ATLANTA CITY GUYS CORP.

| Certificate of Status | 0       |
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Help

S. ROBERTS

NOV 14 2022

From: Kim Ritter

Fax: 18139325244

To:

Fax: (850) 617-6383

Page: 3 of 6

11/14/2022 3:13 PM H22000388505 3

#### **COVER LETTER**

**TO:** Registration Section

Division of Corporations

SUBJECT: ATLANTA CITY GUYS CORP.

Name of corporation - must include suffix

Dear Sir or Madam:

TEXAS DISTRICTO

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:

| KIM KITTER   |
|--|
| Name of Person   |
| CONTRACTORS' REPORTING SERVICE                                     |
| Firm/Company   |
| 23110 SR 54 PMB 336  |
| Address  |
| LUTZ, FL 33549   |
| City/State and Zip code  |
| INFO@ACTIVATEMYLICESNE.COM   |
| E-mail address: (to be used for future annual report notification) |

For further information concerning this matter, please call:

KIM RITTER at ( 813 ) 932-5244

Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroc Street, Suite 810 Tallahassee, FL 32303 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

# 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.

| (Emer name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Inc.," "Co.," or "Corp.")  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in  (State or country under the law of which it is incorporated)  (Bell number, if applicable)  (Date of duration, if other than perpetua  (Date of incorporation)  (Date of duration, if other than perpetua  (Date of security and than perpetua for it is security and the security and security and the security and the security and the security and s |                  |   |  | A CITY GUYS CORP.  |   |
|--|------------------|---|--|--|---|
| GEORGIA  (State or country under the law of which it is incorporated)  (Date of country under the law of which it is incorporated)  (Date of incorporation)  (Date of duration, if other than perpetua  (Date of incorporation)  (Date of duration, if other than perpetua  (Date of incorporation)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 3475 OAK VALLEY RD NE #1460 ATLANTA, GA 30326  (Principal office street address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: CONTRACTORS' REPORTING SERVICE, INC.  Office Address: 2513 RUSTIC OAKS  LUTZ , Florida 33559  (City)  9. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation   |                  | "COMPANY," "CORPORATION,"   | CORPORATED," •                           | of corporation; must include "IN", "Corp," "Inc," "Co," or "Corp." | (Enter name of ce<br>"Inc.," "Co.," "Co   |
| (State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (Date of country under the law of which it is incorporated)  (Date of incorporation)  (Date of duration, if other than perpetual (Date of incorporation)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 3475 OAK VALLEY RD NE #1460 ATLANTA, GA 30326  (Principal office street address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: CONTRACTORS' REPORTING SERVICE, INC.  Office Address: 2513 RUSTIC OAKS  LUTZ , Florida 33559  (City)  9. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation  | - Florida)       | dantal for the name of transporting business in E   |  |  |   |
| (State or country under the law of which it is incorporated)  (PEI number, if applicable)  4. UPON COMPETION OF REGISTRATION (Date of incorporation)  (Date of incorporation)  (Date of duration, if other than perpetua  (Date of incorporation)  (Date of duration, if other than perpetua  (Date of incorporation)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 3475 OAK VALLEY RD NE #1460 ATLANTA, GA 30326  (Principal office street address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: CONTRACTORS' REPORTING SERVICE, INC.  Office Address: 2513 RUSTIC OAKS  LUTZ , Florida 33559  (City)  (City)  9. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation   | (Florida)        | dopted for the purpose of transacting business in re  | corporate name add                       | available in Florida, enter alterna                                | (II name unavaila                         |
| (Date of incorporation)  (Date of duration, if other than perpetual  (Date of incorporation)  (Date of duration, if other than perpetual  (Date of incorporation)  (Date of duration, if other than perpetual  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 3475 OAK VALLEY RD NE #1460 ATLANTA, GA 30326  (Principal office street address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: CONTRACTORS' REPORTING SERVICE, INC.  Office Address: 2513 RUSTIC OAKS  LUTZ , Florida 33559  (City) (Zip code)  9. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation   |                  |   |  |  |   |
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| (Date of incorporation)  (Date of duration, if other than perpetua  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  7. 3475 OAK VALLEY RD NE #1460 ATLANTA, GA 30326  (Principal office street address)  (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: CONTRACTORS' REPORTING SERVICE, INC.  Office Address: 2513 RUSTIC OAKS  LUTZ , Florida 33559  (City) , Florida 33559  (Zip code)  9. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation   |                  |   | ON 5                                     | MPETION OF REGISTRA  | UPON COMPI                                |
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| (Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: CONTRACTORS' REPORTING SERVICE, INC.  Office Address: 2513 RUSTIC OAKS  LUTZ , Florida 33559  (City) (Zip code)  9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation   |                  | 02, F.S., to determine penalty liability)   | 07,1501 & 607,1503                       | (Date first tra<br>(SEE SECTIONS                                   |   |
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| Name: CONTRACTORS' REPORTING SERVICE, INC.  2513 RUSTIC OAKS  LUTZ , Florida 33559  (City) (Zip code)  9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation   |                  |   | · ·                                      |  |   |
| Office Address:    LUTZ  | 2077             | . Box <u>NOT</u> acceptable)  | red agent: (P.O. l                       | street address of Florida regis                                    | 3. Name and <u>stree</u>                  |
| Office Address:    LUTZ  | 8022 NOV 1 IV    | VICE, INC.  | PORTING SERV                             | CONTRACTORS' RI  | Nume                                      |
| LUTZ , Florida 33559  (City) (Zip code)  9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation   | -4C,             |   |  |  | 1 sairte.                                 |
| 9. Registered agent's acceptance:<br>Having been named as registered agent and to accept service of process for the above stated corporatio  |                  | <del></del>   |  | 2513 RUSTIC OAKS   | Office Address:                           |
| 9. Registered agent's acceptance:<br>Having been named as registered agent and to accept service of process for the above stated corporatio  | <u> </u>         | Florida <b>33559</b>  |  | LUTZ   |   |
| 9. Registered agent's acceptance:<br>Having been named as registered agent and to accept service of process for the above stated corporatio  | ι.;              | (Zip code)  |  |  |   |
| Having been named as registered agent and to accept service of process for the above stated corporatio   | သမှ              | :   |  |  |   |
| Having been named as registered agent and to accept service of process for the above stated corporation designated in this application. Thereby accept the appointment as registered agent and agree to act in t   | on at the place  | on at progress for the above stated corneration   |  | d agent's acceptance:  | ). Registered age                         |
| further agree to comply with the provisions of all statutes relative to the proper and complete performa-<br>and I am familiar with and accept the obligations of my position as registered agent.   | this capacity. I | ent as registered agent and agree to act in thi<br>clative to the proper and complete performance | pt the appointme<br>of all statutes rela | this application, I hereby ac<br>to comply with the provision      | lesignated in this<br>further agree to co |
| (Registered agent's signature)   |                  | Doe   | mRe                                      |  | _   |

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.

Fax. (850) 617-6383

| A. DIRECTORS  |   |  |   |  |
|---|---|--|---|--|
| ∏€hamman  | Mame LAURIE DOYLE   | DChairman  | Name:                                   |  |
| ∐Vice Chatrman  | Address: 3475 OAK VALLEY RD, NE, #1-  |  | Address                                 |  |
| □ Director  | ATLANTA, GA, 30326  | Othecon  |   |  |
| <b>E</b> President  | Laurie Doyle  | []President                                      |   |  |
| □Vice President   |   | □Vice President                                  |   | the state of the s |
| Secretary   | ☐ Freasurer   | <b>D</b> Secretary                               |   | []Treasurer  |
| CEO<br>Other  | ©Other  | □Other   |   | □Other   |
| El Chauman  | Name. Laurie Doyle  | □Chairman  | Name:                                   |  |
| ∰Vice Chairman  | Address: 3475 Oak Valley Rd, NE #1460   | ⊡Vice Chairman                                   | Address:                                |  |
| Ducctor   | Atlanta GA 30326  | Director   |   |  |
| □Presideni  |   | □ President                                      |   |  |
| □Vice President   |   | □Vice President                                  | <del></del>                             |  |
| 125 Secretary   | []]Treasurer  | ☐Secretary                                       |   | CiTreasurer  |
| (JOther   |   | Other  |   | □Other   |
| □Chainman   | Name:   | □Chairman  | Name:                                   |  |
| □Vice Chairman  | Address:  | □ Vice Chairman                                  | Address:                                | ,  |
| Director  |   | □Director  |   |  |
| □President  |   | □ President                                      |   |  |
| □Vice President   |   | □Vice President                                  |   |  |
| ☐ Secretary   | ОТтепьшег   | ☐ Secretary                                      |   | ☐ Freasurer  |
| Other   | □Other  | □Other   |   | CiOther  |
| Important Notice:<br>individuals may be                   | Use an attachment to report more than six (6). The attachment to indicate when filling your Florida Department.   | nchment will be imaged<br>ent of State Annual Re | I for reporting p<br>port form.         | tarposes only, Non-indexed   |
|   | Signality of Discour  |  |   |  |
| The officer or three she is aware that fa 6,817,155, F.S. | ctor signing this document (and who is listed in number<br>like information submitted in a document to the Depart | er 11 above) atfirms th                          | at the facts state<br>tes a third degre | d hereiware true and that he or<br>e felony as provided for in   |
| I). MORIE D   | (Typed or printed name and capacity of pers   | on signing application                           | 1                                       | <u> </u>   |

Control Number: 18017013

## 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 seal of my office that

Atlanta City Guys CORP.

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 : 24042806 Date Inc/Auth/Filed: 02/06/2018 Jurisdiction : Georgia Print Date : 11/14/2022 Form Number : 211



Brad Raffengoger

Brad Raffensperger Secretary of State