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S. ROBERTS FEB - 7 2023



Toll-Free: 1.888.449.2638

1.805.449.2638

Email: info@CorpNet.com







January 18, 2023

**Registration Section Division of Corporations** 2415 N. Monroe St., Suite 810 Tallahassee, FL 32303

RE: Iconic Pump, Inc.

To whom it may concern:

The Enclosed Application by Foreign Corporation and Fee(s) are submitted for filing along. Also, please find enclosed a check for state filing fees and a certified copy in the amount of \$78.75 made payable to the FL Dept of State. Please contact me for information needed in regards to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addressed stamped envelope included.

Sincerely,

Amanda J. Beren, Sr. Document Analyst CorpNet, Incorporated 888-449-2638 Ext. 105 filings@corpnet.com



## 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.

Tannassan	e in Florida, enter alternate corporate name ad	opted for the purpose of transacting bu	siness in Florida)	
Tannassan	e in Florida, enter alternate corporate name ad	opted for the purpose of transacting bu	siness in Florida)	
Tennessee			<i>,</i>	
	ander the law of which it is incorporated)			
(State or country t	under the law of which it is incorporated)	(FEI number, if application	ible)	
01/02/2019	5			
(Date of	incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)			
1736 N Fastman Rd		e, i .s., to determine penaity naturity)		
	., Kingsport, TN 37664 (Principal office	street address)		
P.O. Box 3525, Kir	-	street address)		
		address, if different)		
	(0	,	دم	
Name and street a	address of Florida registered agent: (P.O.)	Box NOT acceptable)	02?	
	Registered Agents Inc	,	2022 .! 2	
Name:				
fice Address:	7901 4th St N, Ste 300			
	St. Petersburg	33702	27	
•	(City)	, Florida (Zip code)	9:00	
Registered agent		(—-F)	Û	

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.

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

A. DIRECTORS							
□Chairman	Name: Jason A. Rose	□Chairman	Name: Kinsley Buchanan				
□Vice Chairman	Address:	□Vice Chairman	Address:	N Eastman Rd.			
Director	Kingsport, TN 37660	□Director	Kingsport, TN 37664				
President	<u>.                                    </u>	□President					
□Vice President		□Vice President					
Secretary	□Treasurer	Secretary		Treasurer			
□Other	Other	□Other	<del></del>	□Other			
□Chairman □Vice Chairman □Director □President ■Vice President □Secretary	Name: Sarah Bethany Rose  Name: 1817 Buckingham Court  Address: Kingsport, TN 37660	□Chairman □Vice Chairman □Director □President □Vice President □Secretary	Address:	□Treasurer			
Other	Other	Other		□Other			
☐Chairman ☐Vice Chairman ☐Director ☐President ☐Vice President	Name:	□Chairman □Vice Chairman □Director □President □Vice President	Address:				
☐ Secretary	□Treasurer	☐Secretary		□Treasurer			
Other		□Other	<del></del> -	□Other			
Important Notice: Use an attachment to report more thanks (6) The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing four 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.  Jason A. Rose, President							



## Division of Business Services **Department of State**

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

AMANDA J. BEREN 31416 AGOURA RD., SUITE 118 WESTLAKÉ VILLAGE, CA 91361

December 9, 2022

Request Type: Certificate of Existence/Authorization

Request #:

0507005

Issuance Date: 12/09/2022

Copies Requested:

**Document Receipt** 

Receipt #: 007639497

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3841619010

\$20.00

Regarding:

Iconic Pump, Inc.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 01/02/2019

Status:

Active

Duration Term:

Perpetual

**Business County: SULLIVAN COUNTY** 

Control #:

1002558

Date Formed:

01/02/2019 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

Iconic Pump, 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

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