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(((H23000104521 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Volunteer Trailers, Inc.

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.

_		porate name adopte	d for the purpose of transacting business in F	lorida)
Tenness		3	(FEI number, if applicable)	<u>.</u>
			·	
	.8/2022 of incorporation)	5	(Date of duration, if other than perpetual)	
naci)	or meorporation)		(Date of domition, it other than perpetual)	
	(Date first transacted (SEE SECTIONS 607.15	d business in Flori 01 & 607.1502. F.	da, if prior to registration) S., to determine penalty hability)	;
7901 4th	St N STE 300 St	. Petersbi	urg FL 33702	
		rincipal office stre		
7901 4th S	t N STE 300 St. Peters	•		
	(Cu	rrent mailing addr	ess, if different)	
Name and stree	et address of Florida registered a	igent: (P.O. Box	NOT acceptable)	
Name:	Registered Ager		. ,	
ice Address:	7901 4th St N S	TE 300		
	St. Petersburg		Florida 33702 (Zip code)	
	(City)	······································	(Zip code)	
ving been nam ignated in this ther agree to c	application, I hereby accept th	e appointment a. Estatutes relative	process for the above stated corporation is registered agent and agree to act in thi to the proper and complete performanc as registered agent.	s capacit
	7110			
	(Registere	d agent's signature	2)	

^{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: Atwood, Andrew	El Cheirman	Name: <u>Atwood, Angelia</u>
□Vice Chairman	Address: 7901 4th St N STE 300	□Vice Chairman	Address: 7901 4th St N STE 300
⊠ Director	St. Petersburg, FL 33702	X Dnector	St. Petersburg, FL 33702
№ President		□President	
□Vice President		□Vice President	
□Secretary	□ Treasurer	□ S c cretary	X :Treasurer
□Other	Other	□Other	[]Other
∐Chairman	Name: Carter, Julie	□Chairman	Name:
□Vice Choirman	Address: 7901 4th St N STE 300	□Vice Chairman	Address:
X ¹Director	St. Petersburg, FL 33702	□ Director	
□President		□ President	
□Vice President		CIVice President	
MSecretary	[]Treasurer	☐ Secretary	☐Treasurer - `
Other	[]Other	[]Other	
∐Chairman	Name:	⊡Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	
□President		□President	
IVice President		□Vice President	
∃Secretary	Zi Ticasurei	□ Secretary	□Treasurer
Other		□Other	Other
niportant Notice: Undividuals may be	ise an attachment to report more than six (6). The attac added to the index when filing your Florida Departmen	hinent will be imaged it of State Annual Rep	for reporting purposes only. Non-indexed port form,
2	Signature of Director or	Officer	
he officer or direct he is aware that ful 817.155, F.S.	tor signing this document (and who is listed in number se information submitted in a document to the Departm	IT above) affirms than ment of State constitute	t the facts stated herein are true and that he or es a third degree felony as provided for in
3	(Typed or printed name and capacity of person	Slevet (signing application)	ary



Division of Business Services **Department of State**

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

AMARA REED

116 AGNES RD. STE 200 KNOXVILLE, TN 37919

March 16, 2023

Request Type: Certificate of Existence/Authorization

Request #:

0521032

Issuance Date: 03/16/2023

Filing Fee:

Copies Requested:

Document Receipt

Receipt #: 007911435

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3847142066

\$20.00

Regarding:

VOLUNTEER TRAILERS, INC.

Filing Type:

For-profit Corporation - Domestic

Control #:

1370147

Formation/Qualification Date: 11/18/2022

Date Formed:

11/18/2022

Status:

Active

Formation Locale: TENNESSEE

Duration Term:

Perpetual

Inactive Date:

Business County: GIBSON COUNTY

CERTIFICATE OF EXISTENCE

1. Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

VOLUNTEER TRAILERS, 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 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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