## 2000338

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinent Harmon)
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## **COVER LETTER**

_	tration Section ion of Corporations					
SUBJECT:	MidSouth Petroleum Corporati	on				
Name of corporation - must include suffix						
Dear Sir or M	adam:					
"Certificate of	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tra	f Good Standi	ng" and check are subm			
Please return	all correspondence concerning	g this matter to	the following:			
Richard M. Ma	iyers					
		Name of Pe	erson			
Mayers & Con	npany, PC					
		Firm/Compa	any			
P O Box 1169						
		Address	3			
Vernon, AL 3:	5592					
		City/State and	Zip code			
karen@mayers						
	E-mail address:	(to be used for	future annual report no	tification)		
For further in	formation concerning this ma	tter, please cal	1:			
Richd M. May	ers	205	) 695-7199  Daytime Telephone Number			
Nam	e of Person	Area Code	Daytime Telepho	one 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			
	check for the following amounce payable to: FLORIDA DEI ing Fee	PARTMENT (	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy		

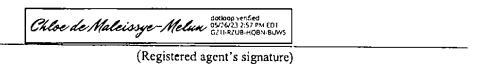
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

Enter name of c	orporation; must include "INCORPORATED	." "COMPANY." "CORPORATION."		-
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")	, cold old flort,		
(If name unavail		adopted for the purpose of transacting business in F	lorida)	-
Alabama	3	3. 63-1021772		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		-
04/19/1990				
(Date of incorporation)		(Date of duration, if other than perpetual)	(Date of duration, if other than perpetual)	
05/23/2023				
	(Date first transacted business i	in Florida, if prior to registration)	<del></del>	-
	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liability)		
8596 Hwy 18 W '	Vernon, AL 35592			
		ice street address)		•
P.O. Box 1169 V	ernon, AL 35592			
	(Current maili	ng address, if different)		
			2023	
Name and stree	et address of Florida registered agent: (P.6	O. Box NOT acceptable)	′- <u>-</u> -	
Name:	Chloe Mayers	- ,	12	
ivame;		<del></del>	ά	•
ffice Address:	770 Glendale Ave		Aβ	•
	Naples	. Florida <sup>34110</sup>	ά	
	(City)	(Zip code)	3 8	

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.



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.

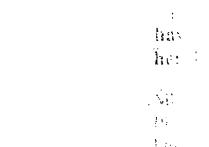
A. DIRECTORS			
□Chairman	Name: Richard Mayers	□Chairman	Name:
□Vice Chairman	Address: P O Box 1169	□Vice Chairman	Address:
□Director	Vernon, AL 35592	□Director	
■ President		□President	
□Vice President	···	□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
Other	Other	Other	Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	□Secretary	□Treasurer
□Other	Other	□Other	Other
□ Chairman	Name:	□Chairman	Name:
□ Vice Chairman	Address:		Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	□Secretary	☐ Treasurer
Other	Other	□Other	Other
Important Notice: Individuals may be	Use an attachment to report more than six (6). The attactadded to the index when filing your Florida Department	nt of State Annual Re	eport form.
The officer or direct she is aware that fars. \$17.155, F.S.	ctor signing this document (and who is listed in number also information submitted in a document to the Department.	11 above) affirms the ment of State constitu	nat the facts stated herein are true and that he or ites a third degree felony as provided for in

Wes Allen Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

## STATE OF ALABAMA

I, Wes Allen, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Mid South Petroleum Corporation was formed in Lamar County on April 19, 1990. The Alabama Entity Identification number for this entity is 000-136-678. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20230607000009730

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

06/07/2023

Date

We Gel-

Wes Allen

Secretary of State