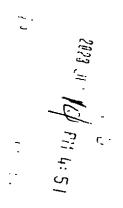
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(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				



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06/15/23--01019--003 **70.00



Office Use Only

F6271

T. LEMIEUX

COVER LETTER

	istration Section ision of Corporations			
SUBJECT	Sumrall Holdings, Inc d	ba Nu-Way A	uto	
	Name	of corporation	- must include suffix	
Dear Sir or	Madam:			
"Certificate	d "Application by Foreign C of Existence," or "Certificate inced foreign corporation to (e of Good Stan	Authorization to Transact Bus ding" and check are submitted ss in Florida.	iness in Florida." I to register the
Please return	i all correspondence concern	ing this matter	to the following:	
		Patricia B	enge	
		Name of I	Person	
		Sumrall Ho	ldings, Inc.	
		Firm/Com	pany	
	1	2100 Highwa	ay 49, #628	
		Addre		
		Gulfport, M	IS 39503	
		City/State ar	id Zip code	
		pbenge@sa		
	E-mail address	s: (to be used fo	or future annual report notifie:	ition)
For further in	iformation concerning this in	natter, please ca	ill:	
Patricia Be	enge	ar (228	, 832-0044	
Nan	ne of Person	Area Code	Daytime Telephone N	lumber
Regi: Divis The (2415	EFT/COURIER ADDRES stration Section sion of Corporations Centre of Tallahassee N. Montoe Street, Suite 810 hassee, FL 32303		MAILING ADDRE Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	ions
Enclosed is a Please make ef II \$70,00 Fil	check for the following amount to the payable to: FLORIDA DE ing Fee	PARTMENT (g Fee &	\$78.75 Filing Fee & S Certified Copy	87.50 Filing Fee, Tertificate of Status & Certified Copy



June 20, 2023

PATRICIA BENGE 12100 HWY 49 #628 GULFPORT, MS 39503

SUBJECT: SUMRALL HOLDINGS, INC

Ref. Number: W23000086271

We have received your document for SUMRALL HOLDINGS, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please have the registered agent of Registered Agents Inc sign the acceptance if registered agent not the president of SUMRALL HOLDINGS, INC. (Stan Stan Sumrall).,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

RECEIVED

Letter Number: 023A00013921

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.

Sumrall Holdings	CANC.				
(Enter name of co	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION	ON,"		
Sum yal	1 Holdings Of Missible in Florida, enter alternate corporate nan	ne adopted for the purpose of transact	ing business in Florida)		
·	1. 1. 1	3. <u>A 1-09961</u>	27 - 094(6139 (FEI number, if applicable)		
09	121/2009	5			
<u>09 /21 /2009</u> 5		(Date of duration, if othe	(Date of duration, if other than perpetual)		
		s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liab	ility)		
	10500 A Florida	ANG FAMOR EL	32/12		
	(Principal of	Ave Tampa FL office street address)			
	(Current ma	iling address, if different)			
	(Curon na	ming data ess, in direction,			
No-s and at-	t address of Florida registered promt. (I	D.O. Poy NOT googatable)	2823		
Name and stree	t address of Florida registered agent: (f	P.O. Box NOT acceptable)	23 ,		
Name:	Registered Agents Inc		` 		
	7901 4th St N STE 300				
ffice Address:	<u> </u>		Kd G		
	St. Petersburg	, Florida	- E		
	(City)	(Zip code)	; 		
			ं <u>त</u>		
	ent's acceptance:	ming of munaces for the above stat	ad agreemention at the play		
	ed as registered agent and to accept se application, I hereby accept the appoi				
	omply with the provisions of all statute				
	with and accept the obligations of my				
T	Durid X About s				
d	MIN Develo				
_	(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.

A. DIRECTORS	·		
□Chairman	Name: Stan Sumrall	□ Chairman	Name: Angela Sumrall
□Vice Chairman	Address: 18210 Autry Dr. Gulfport, MS 39503	□Vice Chairman	Address: 18210 Autry Dr. Gulfport, MS 39503
□Director		□ Director	
⊘ President		□President	
□Vice President		□Vice President	
□ Secretary	□Treasurer	□ Secretary	E Treasurer
□Other	COther	Cother Incorpo	orator Cother
□Chairman □Vice Chairman	Name: Angela Sumrall Address: 18210 Autry Dr. Gulfport, MS 39503	□Chairman	Name:Address:
⊗Director		□ Director	
□President		□President	
		□ Vice President	
□ Secretary	□ Treasurer	☐ Secretary	□ Treasurer
COther		□ Other	
□Chairman □Vice Chairman □Director	Name: Stan Sumrall Address: 18210 Autry Dr. Gulfport, MS 39503	□ Chairman □ Vice Chairman □ Director	Name:Address:
E President		□ President	
□Vice President		□ Vice President	
□ Secretary	CTreasurer	□ Secretary	□ Treasurer
Somer Incorpo		COther	
The officer or direc she is aware that falls.817.155, F.S.	Jse an attachment to report more than six (6). The attact added to the index when filing your Florida Department Signature of Director of tor signing this document (and who is listed in number lise information submitted in a document to the Department.)	chment will be unaged nt of State Annual Re r Officer	I for reporting purposes only. Non-indexed port form.
13. Stan Su	ımrali		



Office of the Secretary of State Jackson, Mississippi

Certificate of Good Standing

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on the 21st day of September, 2009, the State of Mississippi issued a Charter/Certificate of Authority to:

SUMRALL HOLDINGS, INC.

That the state of incorporation is Mississippi.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

That insofar as the records of this office are concerned, the said Sumrall Holdings, Inc. is in good standing at this time.

Given under my hand and seal of office the 31st day of May, 2023

Michael Watson

Certificate Number: CN23165961

Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx