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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

****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
GUESS & CO. CORPORATION HOLDING CO., INC.**

Certificate of Status	0
Certified Copy	1
Page Count	05
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLahassee, FLORIDA

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**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.

1. GUESS & CO. CORPORATION HOLDING CO., INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NORTH CAROLINA

(State or country under the law of which it is incorporated)

3.

(FBI number, if applicable)

4. 08/15/2023

(Date of incorporation)

5.

(Date of duration, if other than perpetual)

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 7505 NW Tiffany Springs Parkway, Suite 200, Kansas City, MO 64153

(Principal office street address)

7505 NW Tiffany Springs Parkway, Suite 200, Kansas City, MO 64153

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Capitol Corporate Services, Inc.

Office Address: 515 East Park Avenue 2nd Fl

Tallahassee, Florida 32301

(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 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.



Kim Tadlock, Asst. Secretary on behalf
of Capitol Corporate Services, Inc.

(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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A. DIRECTORS

☐ Chairman Name: James R. Jackson

☐ Vice Chairman Address: 7505 NW Tiffany Springs Parkway, Suite 200

☒ Director Kansas City, MO 64153

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Jerry D. Guess

☐ Vice Chairman Address: 7505 NW Tiffany Springs Parkway, Suite 200

☒ Director Kansas City, MO 64153

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: D. Michelle Stewart

☐ Vice Chairman Address: 7505 NW Tiffany Springs Parkway, Suite 200

☒ Director Kansas City, MO 64153

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Jerry D. Guess

☐ Vice Chairman Address: 7505 NW Tiffany Springs Parkway, Suite 200

☐ Director Kansas City, MO 64153

☒ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: D. Michelle Stewart

☐ Vice Chairman Address: 7505 NW Tiffany Springs Parkway, Suite 200

☐ Director Kansas City, MO 64153

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other CEO ☐ Other _____

☐ Chairman Name: Angela M. Ates

☐ Vice Chairman Address: 7505 NW Tiffany Springs Parkway, Suite 200

☐ Director Kansas City, MO 64153

☐ President _____

☐ Vice President _____

☒ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. /s/ Angela M. Ates

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.

13. Angela M. Ates, Secretary

(Typed or printed name and capacity of person signing application)

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Additional Officers and Directors

Officers

Angela M. Ates, Chief Corporate Officer, 7505 NW Tiffany Springs Parkway, Suite 200, Kansas City, MO 64153

Angela M. Ates, Treasurer, 7505 NW Tiffany Springs Parkway, Suite 200, Kansas City, MO 64153

Kelli D. Plagmann, CFO, 7505 NW Tiffany Springs Parkway, Suite 200, Kansas City, MO 64153

Kelli D. Plagmann, Chief Operating Officer, 7505 NW Tiffany Springs Parkway, Suite 200, Kansas City, MO 64153

Halie M. Hughes, Deputy Secretary, 7505 NW Tiffany Springs Parkway, Suite 200, Kansas City, MO 64153

Halie M. Hughes, Deputy Treasurer, 7505 NW Tiffany Springs Parkway, Suite 200, Kansas City, MO 64153



NORTH CAROLINA

Department of the Secretary of State

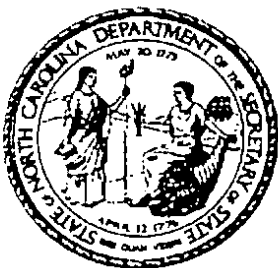
CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

GUESS & CO. CORPORATION HOLDING CO., INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 15th day of August, 2023, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 24th day of August, 2023.

Elaine F. Marshall

Secretary of State