F24000000009

(f	Requestor's Name)	
	Address)	
(,	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	
(0	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fil	ling Officer:	
	<u> </u>	

Office Use Only



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2023 DEC 28 FH 12: 32

RECEIVED

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NALLAHASSES FLORIDA

JAN 0 3 2024

K. Brumbley

Incorporating Services, Ltd.

incserv^o 1540 Glenway Drive Tallahassee, FL 32301

850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM -

Melissa Moreau mmoreau@incserv.com

850.656.7953

REQUEST_DATE 12/28/2023

PRIORITY Regular Approval

OUR REF # (Order ID#), 1217111

ORDER ENTITY WYATT SEAL, INC.

								-		-
PLEASE	PERFORM TH	IE FOLLOV	WING SERVICES	: :	 	 - has -	- -		۰	
WYAT'	Γ SEAL, INC.	(FL)								

File the attached foreign qualification document

NOTES: \$70.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and couner package if applicable. For UCC orders, please include the thru date on the results.

Thursday, December 28, 2023 Page I of I

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJ	ECT: Wyatt Se	al, Inc.		
			corporation	- must include suffix
Dear S	Sir or Madam:			
"Certii	licate of Existence	ion by Foreign Corpe," or "Certificate of corporation to tran	f Good Stanc	Authorization to Transact Business in Florida," ling" and check are submitted to register the s in Florida.
Please	return all corresp	ondence concerning	g this matter	to the following:
	P. Bethea, Jr., Esq			
			Name of P	erson
Adams	and Reese LLP			
		 -	Firm/Comp	Dany
1221 M	fain Street, Suite 13	200		
			Addres	SS
Columi	bia, SC 29201			
		(City/State an	d Zip code
rob.bet	hea@arlaw.com			
	-	E-mail address: (to be used for	r future annual report notification)
For fur	ther information	concerning this mat	ter, please ca	II):
Robert	P. Bethea, Jr., Esq.	at	.(212-4978
	Name of Person		Area Code	
	Registration Sec Division of Corp The Centre of Ta	porations allahassee Street, Suite 810		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Please n	ed is a check for t nake check payable 00 Filing Fee	the following amour to: FLORIDA DEP \$78.75 Filing I Certificate of S	ARTMENT (DF STATE \$78.75 Filing Fee &

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.

"Inc.," "Co.," "	corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Согр.")	"COMPANY," "CORPORATION,"	
(If name unavai	lable in Florida, enter alternate corporate name ad	material Country	
South Carolina			Florida)
(State or count 06/27/72		(FEI number, if applicable)	
(Dat	of incorporation) 5.	(Date of duration, if other than perpetual	1)
11/a	(SEE SECTIONS 607.1501 & 607.1502	· · · · · · · · · · · · · · · · · · ·	
Woodcross Dr	ve, Columbia, SC 29212		
Woodeross Dr.	ve, Columbia, SC 29212 (Principal office	street address)	262
	ve, Columbia, SC 29212 (Principal office (Current mailing a	ddress, if different)	DEC 2
	ve, Columbia, SC 29212 (Principal office	ddress, if different)	DEC 28
Name and <u>stre</u> Name:	ve, Columbia, SC 29212 (Principal office) (Current mailing a set address of Florida registered agent: (P.O. E	ddress, if different)	DEC 28
Name and stree	ve, Columbia, SC 29212 (Principal office) (Current mailing a set address of Florida registered agent: (P.O. E Brittany Khorramian 417 Hobbs Street	ddress, if different)	DEC 2

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.

Billtamy Klomamian
(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: <u>Doug Wyatt</u> □ Chairman Name: Michael Wyatt □ Vice Chairman Address: <u>720 Imperial Court</u> □ Vice Chairman Address: 720 Imperial Court ☐ Director Charlotte, NC 28273 □ Director Charlotte, NC 28273 ☼ President □President ☐Vice President ☐ Vice President ☐ Secretary Treasurer ☐ Sccretary ☐Treasurer □ Other _____ □ Other _____ ☑Other Executive Vice President ☐Other_____ □ Chairman Name: Nick Wyatt □ Chairman Name: <u>Ilhan Avgun</u> □Vice Chairman Address: 720 Imperial Court ☐ Vice Chairman Address: 720 Imperial Court □ Director Charlotte, NC 28273 Director Charlotte NC 28273 ☐ President ☐ President □Vice President □Vice President ☐ Secretary ☐Treasurer ☐ Secretary ☐ Treasurer ØOther Executive Vice President □Other ___ ☑Other Chief Financial Officer □Other _____ □ Chairman Name: Scott McMillan Chairman Name: Janice Blessing □Vice Chairman Address: 720 Imperial Court ☐ Vice Chairman Address: 720 Imperial Court ☐ Director Charlotte, NC 28273 □ Director Charlotte, NC 28273 ☐ President ☐ President ☐ Vice President □ Vice President

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.

☐ Secretary

☐Treasurer

☑Other Chief Operating Officer ☐Other

12. Signsture of Die

☑Other Executive Vice President ☐Other _____

☐Trensurer

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.

Michael Wyatt, Executive Vice President

☐ Secretary

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

WYATT SEAL, INC., a corporation duly organized under the laws of the State of South Carolina on June 27th, 1972, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 12th day of December, 2023.

Mark Hammond, Secretary of State