Florida Department of State Division of Corporation

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

kpatterson@flowconstruction.com Email Address:___

FOREIGN PROFIT/NONPROFIT CORPORATION FLOW CONSTRUCTION COMPANY INC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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To:

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. Flow Construction Company, 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) TN 3. 62-1472469 62-1472

(State or country under the law of which it is incorporated) (FEI number, if applicable)

07/26/1991 5. (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.150) & 607.1502, F.S., to determine penalty liability) 7. 3628 TROUSDALE DR STE ENASHVILLE, TN 37204-4523 USA (Principal office street address) 3628 TROUSDALE DR STE ENASHVILLE, TN 37204-4523 USA (Current mailing address, if different) 8. Name and street address of Florida registered agent; (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation (City) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the placedesignated in this application, I hereby accept the appointment as registered agent and agree to act in this expacity. Terfurther 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. C T Corporation System

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]:

A. DIRECTORS					
□Chairman	Name: Brad Ellis	□Chairman	Name:	Edwin Gramling	
□Vice Chairman	Address: 3628 – E Trousdale Dr.	□Vice Chairman	Addiess:	628 – E Trousdale Dr.	
Director	Nashville, TN 37204	□ Director		Nashville, TN 37204	
Z President		□President			
□Vice President	Adapted 111 feet for 100 annual recommendation and the contraction of frequency	₩Vice President			
☐ Secretary	☐ Treasurer	□Secretary		□Treasurer	
□Other	Other	□Other		□Other	
□Chairman	R. Allen Lindsey, Jr.	⊟Chairman	Name:		
∐Vice Chairman	2629 Trougánio De	□Vice Chairman			
Director	Nashville, TN 37204	□Director			
LiPresident		□President			
ElVice President		□Vice President			
☑Secretary:	☐Treasurer	LiSecretary		□ I reasurer	
⊟Other	□Other	□Other		Other	
□Chaimnan	Greg Tomlin	□Chairmaa	Name:		
∐Vice Chairman	2000 F Travadala Da	□Vice Chairman	Address:		
LlDirector	Nashville, TN 37204	Director			
□President		□President			
년Vice President		CiVice President			
USceretary	[]Treasurer	☐ Secretory		[]Treasurer	
Other		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.	Brad Ellis	6.7			
12. Brad Ellis 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. Brad Ellis - President 13. Crossed or printed pages and capacity of person signing application)					



To:

Division of Business Services Department of State

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

WOLTERS SYSTEM **WOLTERS SYSTEM** 600 SOUTH STREET

December 27, 2023

Request Type: Certificate of Existence/Authorization

Request #: 0562147

SPRINGFILED, IL 62704

Issuance Date: 12/27/2023

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Copies Requested:

Document Receipt

Receipt #: 008524133

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3864799021

\$20.00

Regarding:

FLOW CONSTRUCTION COMPANY

Filing Type:

For-profit Corporation - Domestic

Control #:

242989

Formation/Qualification Date: 07/26/1991

Date Formed:

07/26/1991

Status:

Active

Formation Locale: TENNESSEE

Duration Term:

Perpetual

Inactive Date:

Business County: DAVIDSON COUNTY

CERTIFICATE OF EXISTENCE

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

FLOW CONSTRUCTION COMPANY

- * 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 filed the most recent annual report required with this office;
- * 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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