# F24000005932

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





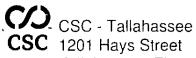
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Tallahassee, FL 32301-2607 850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 11/18/24 Order #: 1689514-1

Re: Bland Landscaping Company, Inc.

Processing Method: Routine

Charles was

### TO WHOM IT MAY CONCERN:

## Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.0 - FL State Account Number:

120000000195

Certificate of Good Standing from State of Incorporation

#### Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

### \* 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.

(II name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacti	ng business in Florida)	
Deleware 3.		82-3489284		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
11/20/2017	5.	Indefinite		
(Date	of incorporation)	(Date of duration, if other than perpetual)		
12/10/2024				
<del></del>		n Florida, if prior to registration)	Para	
1070 1 1 11	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty habi	nty)	
18/2 Everiee Rd,	Jacksonville FL 32216		<del></del>	
DO D 222 4	•	ice <u>street</u> address)		
PO Box 727 Ape			2	
	(Current mailir	ig address, if different)	824 NOV	
Name and store	t addraga of Elanida mulatared agants (I) (	Day NOT accountables		
Name and <u>street address</u> of Florida registered agent: (P.		9. Box <u>(NOT</u> acceptable)	- A - A - A - A - A - A - A - A - A - A	
Name:	Corporation Service Company			
Office Address:	1201 Hays Street			
office Address.	Tallahassee	32301	7 <b>5</b>	
	(City)	, Florida(Zip code)		
	(Cliy)	(Zip code)		

Corporation Service Company

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:	□Chairman	Name: Brad O'dell			
□Vice Chairman	Address: 227 West Monroe St	□Vice Chairman	227 West Monroe St			
□Director	Ste 3550	□Director	Ste 3550			
□President	Chicago, IL 60606	□President	Chicago, IL 60606			
□Vice President		□Vice President				
☐ Secretary	□Treasurer	■ Secretary	□Treasurer			
□Other	Other	□Other	□Other			
□Chairman	Name:	□ Chairman	Thomas Bland			
	1200 Perry Rd Address:	□ Vice Chairman	Name: 1200 Perry Rd Address:			
	Apex, NC 27502		Apex, NC 27502			
□Director		□ Director				
		□President				
□Vice President		□Vice President				
☐ Secretary	☐ Treasurer	Secretary	□Treasurer			
■Other <u>CEO</u>	□Cither	■Other CFO	□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	□ Cither			
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 jijdex when filing your Florida Department of State Annual Report form.						
12	Mun M Hund	CVC"				
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						

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 fellowy as provided for in s.817.155, F.S.

13. Thomas Bland



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BLAND LANDSCAPING COMPANY, INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF NOVEMBER,

A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLAND LANDSCAPING COMPANY, INC." WAS INCORPORATED ON THE TWENTIETH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Authentication: 204897982

Date: 11-18-24

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