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(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Certified Copies Certificates of Status					
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COVER LETTER

10:		tration Section on of Corporations						
SUBJ	· ECT:	TERRY MURPHY RACE CARS, INC.						
0000	Name of corporation - must include suffix							
Dear S	Sir or M	adam:						
"Certi	ficate of	"Application by Foreign Corpo" Existence," or "Certificate of ced foreign corporation to tran	Good Stan	ding" and check are sub-				
Please	return :	all correspondence concerning	this matter	to the following:				
Andre	w Vulpis	\$						
			Name of	Person				
MY SI	ERVICE	S						
			Firm/Com	pany	1.			
2944 \$	FLORI	DA AVE						
		•	Addro	ess	•			
LAKE	LAND,	FL 33803						
			City/State a	nd Zip code	·			
admin(@myser	vicesusa.com						
		E-mail address: (t	o be used t	or future annual report no	otification)			
For fu	rther inf	ormation concerning this matt	er, please c	all:				
Andrew Vulpis a Name of Person		at	(813	727-0027				
		e of Person	Area Code	Daytime Teleph	one Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Please		check for the following amounted payable to: FLORIDA DEPA ng Fee S78.75 Filing F Certificate of S	ARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy			

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.

TERRY MURPHY RACE CARS, INC.						
(Enter name of c	orporation; must include "INCORPORATED, orp." "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"				
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in F	lorida)			
MISSOURI 2.	3	431909908 (EEI number if applicable)				
(State or countr	y under the law of which it is incorporated)	(гы пиноет, и аррисаоте)				
(Date	of incorporation)	(Date of duration, if other than perpetual)				
7	(SEE SECTIONS 607.1501 & 607.1 VE SEBRING, FL 33875	n Florida, if prior to registration) 502, F.S., to determine penalty liability) ice street address)				
	(Current mailin	ng address, if different)	ZUZ			
8. Name and street	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	2024 NOV			
Name:	MY-SERVICES					
Office Address:	2944 S FLORIDA AVE		7			
	LAKELAND	, Florida	7:5			
	(City)	(Zip code)	C			

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.

(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	TERRANCE MURPHY Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director	SEBRING, FL 33875	□Director	SEBRING, FL 33875				
President		□President					
□Vice President		■ Vice President					
☐ Secretary	□Treasurer	□Secretary	□Treasurer				
□Other	Other	Other	Other				
☐ Director ☐ President	TERRANCE MURPHY 1926 QUEEN AVE Address: SEBRING, FL 33875 Treasurer Other	☐ Chairman ☐ Vice Chairman ☐ Director ☐ President ☐ Vice President ☐ Secretary ☐ Other	□Treasurer				
□Chairman ·	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director		□Director					
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary	□Treasurer				
Other	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 Porida Department of State Annual Report form. Signiture 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. TERRANCE MURPHY - PRESIDENT							

STATE OF MISSOUR



John R. Ashcroft Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

TERRY MURPHY RACE CARS, INC. 00491079

was created under the laws of this State on the 14th day of December, 2000, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 22nd day of October, 2024.

Secretary of State

Certification Number: CERT-10222024-0079

