

# M19000001857

Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FC4000000023  
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**Foreign Limited Liability Company**  
**KENCO TRANSPORTATION SERVICES, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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K. SALY

FEB 22 2019

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. KENCO TRANSPORTATION SERVICES, LLC  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "L.L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")

2. TENNESSEE 3. FEIN# 20-3450473  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEIN number, if applicable)

4. 02/01/2019  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.1903, F.S. to determine penalty liability)

5. KENCO TRANSPORTATION SERVICES, LLC 6. KENCO TRANSPORTATION SERVICES, LLC  
(Street Address of Principal Office) (Mailing Address)  
974 EXPLORER COVE, SUITE 132 2001 RIVERSIDE DRIVE  
ALTAMONTE SPRINGS, FL 32701 CHATTANOOGA, TN 37406

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

Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

## Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

By: C T Corporation System  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
President	David Caines 2001 Riverside Drive Chattanooga, TN 37406	Vice President	Turney Thompson 2001 Riverside Drive Chattanooga, TN 37406
Secretary	Paula Hise 2001 Riverside Drive Chattanooga, TN 37406	CEO	Denis Reilly 2001 Riverside Drive Chattanooga, TN 37406

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

DAVID CAINES  
Signature of an authorized person  
Typed or printed name of signer



**Tre Hargett**  
Secretary of State

**FILED**  
**19 FEB 21 PM 12:36**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**Division of Business Services**  
**Department of State**  
State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

WOLTERS KLUWER  
118 W EDWARDS STE 200  
SPRINGFIELD, IL 62704

February 21, 2019

Request Type: Certificate of Existence/Authorization  
Request #: 0306612

Issuance Date: 02/21/2019  
Copies Requested: 1

**Document Receipt**

Receipt #: 004560135 Filing Fee: \$20.00  
Payment-Credit Card - State Payment Center - CC #: 3750740919 \$20.00

Regarding:	KENCO TRANSPORTATION SERVICES, LLC		
Filing Type:	Limited Liability Company - Domestic	Control #:	501301
Formation/Qualification Date:	08/30/2005	Date Formed:	08/30/2005
Status:	Active	Formation Locale:	TENNESSEE
Duration Term:	Perpetual	Inactive Date:	
Business County:	HAMILTON 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

**KENCO TRANSPORTATION SERVICES, LLC**

\* is a Limited Liability Company duly formed 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.

Tre Hargett  
Secretary of State

Processed By: Cert Web User

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