# M25000000749

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PICK-UP WAIT MAIL
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#### COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: Trident Transport, L	Limited Liability Company
	npany for Authorization to Transact Business in Florida," Certificate of renced foreign limited liability company to transact business in Florida,
Please return all correspondence concerning this matter to the	e following:
Tim Webb	
4	Same of Person
Trident Transport	<del>-</del>
Trident Transport	irm/Company
505 Riverfront P	kwV
	Address
Chattanooga TN City/s	37402 State and Zip Code
tim. webb@ trident E-mail address: (to be use	
For further information concerning this matter, please call:	
	at ( <u>865</u> ) <u>384 · 289 +</u> Area Code Daytime Telephone Number
Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPAR  \$\Boxed{\Pi}\$ \$125.00 Filing Fee \$\Boxed{\Pi}\$ \$130.00 Filing Fee & Certificate of \$1	\$155.00 Filing Fee & \$\Bigsim \$160.00 Filing Fee, Certificate

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Trident Transport LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.	C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must i	nelude "Limited Liability Company," "L.L.C." or "LEC.")
2 Tennessee  (Jurisdiction under the law of which foreign limited liability company is organized)  3. 46 - 4	308 66 Z (FE number, if applicable)
, ., ., ., ., ., ., ., ., ., ., ., ., .,	,
4. 1/1/2019	
(Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability)	
5. 505 River Front Pkwy  6. Sam  (Mailing Add)	<u>_</u>
Street Address of Principal Office) (Mailing Add	(55)
Cratanina TN 37402	
Crattanooga TN 37402	
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: Tim Webb	
.vainc	
Office Address: 15305 1st Street East #204	
Madeira Beach E. , Florida	33708
(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.

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:

Name and Address:

Manager

Name: Hearn Haley

Manager

Name: Hearn Haley

□Manager	Name: Mark Harrell	□Manager	Name: Heath Haley
<b>M</b> Member	Address: 112 Sumach ST	Member	Address: 829 N Bragg AVE
□Authorized	Lookout Mtn TN 37350	□Authorized	Lookaut Mtn, TN 37350
Person		Person	
□Other	Other	□Other	□Other
Manager	Name: Tim Webb	Manager	Name: Angela Ayers
□Member	Address: 15305 Ist Street E	□Member	Address: 4817 Rolling Meadons
□Authorized	#204	□Authorized	Signal 4th TN 37377
Person	Madeira Beach FL 3370	වි Person	· · · · · · · · · · · · · · · · · · ·
Other		□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□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 Florida Department of State Annual Report form.

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.

Signature of an authorizon person

Typed cybrinted name of signed



## Division of Business Services Department of State

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

CFS SUITE B 992 DAVIDSON DR NASHVILLE, TN 37205

Request Type: Certified Copies

Request #:

613055

Issuance Date:

11/25/2024

Copies Requested:

**Document Receipt** 

Receipt #: 009352436

Filing Fee:

\$20.00

Payment-Account - #026945 CAPITAL FILING SERVICE INC, NASHVILLE, TN

\$20.00

Tre Hargett Secretary of State

Processed By: Cindy Johnson

The attached document(s) was/were filed in this office on the date(s) indicated below:

Reference #	Date Filed	Filing Description	
A0204-1254	11/26/2013	Initial Filing	
A0249-2594	06/03/2014	Notice of Determination	
A0250-0716	06/05/2014	2013 Annual Report (Due 04/01/2014)	
B0109-5676	06/02/2015	Notice of Determination	
B0116-0615	06/18/2015	Mailing Address Update	
B0116-0626	06/18/2015	2014 Annual Report (Due 04/01/2015)	
B0214-7834	03/16/2016	2015 Annual Report (Due 04/01/2016)	
B0377-0676	04/03/2017	2016 Annual Report (Due 04/01/2017)	
B0466-8781	01/19/2018	2017 Annual Report (Due 04/01/2018)	
B0643-7241	01/25/2019	2018 Annual Report (Due 04/01/2019)	
B0823-2288	02/24/2020	2019 Annual Report (Due 04/01/2020)	
B1011-1024	03/30/2021	2020 Annual Report (Due 04/01/2021)	
B1191-4414	03/30/2022	2021 Annual Report (Due 04/01/2022)	
B1402-5721	06/02/2023	Notice of Determination	

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that **Trident Transport, LLC**, Control # 739042 was formed or qualified to do business in the State of Tennessee on 11/26/2013. Trident Transport, LLC has a home jurisdiction of TENNESSEE and is currently in an Active status. The attached documents are true and correct copies and were filed in this office on the date(s) indicated below.

The attached document(s) was/were filed in this office on the date(s) indicated below:

Reference #	Date Filed	Filing Description	
B1418-0807	06/26/2023	2022 Annual Report (Due 04/01/2023)	_
B1541-6129	04/01/2024	2023 Annual Report (Due 04/01/2024)	