

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000005479

Entity Name: I3 VERTICALS MANAGEMENT SERVICES, INC.**Current Principal Place of Business:**40 BURTON HILLS BLVD., SUITE 415
NASHVILLE, TN 37215**Current Mailing Address:**40 BURTON HILLS BLVD., SUITE 415
NASHVILLE, TN 37215 US**FEI Number:** 30-0847828**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL REGISTERED AGENTS, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|----------------------------------|
| Title | CEO |
| Name | DAILY, GREG |
| Address | 40 BURTON HILLS BLVD., SUITE 415 |
| City-State-Zip: | NASHVILLE TN 37215 |

| | |
|-----------------|----------------------------------|
| Title | COO, DIRECTOR |
| Name | MERIWETHER, SCOTT |
| Address | 40 BURTON HILLS BLVD., SUITE 415 |
| City-State-Zip: | NASHVILLE TN 37215 |

| | |
|-----------------|----------------------------------|
| Title | CFO, DIRECTOR |
| Name | WHITSON, CLAY |
| Address | 40 BURTON HILLS BLVD., SUITE 415 |
| City-State-Zip: | NASHVILLE TN 37215 |

| | |
|-----------------|----------------------------------|
| Title | SECRETARY |
| Name | MAPLE, PAUL |
| Address | 40 BURTON HILLS BLVD., SUITE 415 |
| City-State-Zip: | NASHVILLE TN 37215 |

| | |
|-----------------|------------------------------------|
| Title | PRESIDENT |
| Name | STANFORD, RICK |
| Address | 40 BURTON HILLS BLVD. SUITE 415 |
| City-State-Zip: | NASHVILLE TN 37215 |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAUL MAPLE**SECRETARY****07/29/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date