# F10000001859

(Re	equestor's Name)	,
. (Ad	ldress)	<u>,                                      </u>
(Ad	ldress)	
(Cil	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
<b></b>		

Office Use Only



800173824688

800173824688 04/06/10-01018-008 \*\*78.75

77,0 1,000,0

2010 APR 19 PM 4: 42

T. Sure APR 20 2010.

# **COVER LETTER**

	Filing S sion of C	ection Corporations				
SUBJECT:	. Spri	ng Street Inter	iors, lı	nc.		
Se Bone 1.	·				include suffix	x)
Dear Sir or N	Madam:					
	of Exister	nce," and check are s				act Business in Florida," enced foreign corporation to
Please return	all corre	spondence concernir	ng this ma	atter to the fo	llowing:	
Thomas	Troes	sken				
			(Nam	e of Person)		
Spring S	treet I	nteriors, Inc.				
			(Firm	/Company)		
33 Fair S	Street					
			(A	Address)		
Newnan,	, GA. :	30263				
			(City/St	ate and Zip c	ode)	
For further in	nformatic	on concerning this ma	atter, plea	use call:		
Thomas	Troek	en .	at ( 40	4 379	-9468	
(Nar	me of Per	rson)	(A1	rea Code & D	aytime Telep	hone Number)
New Divis Clifte 2661	Filing So sion of C on Build Executive	orporations	i:		MAILING A New Filing S Division of C P.O. Box 63: Tallahassee,	Section Corporations 27
Enclosed is a	check fo	or the following amou	unt:			
\$70.00 Fili	ing Fee	\$78.75 Filing Certificate of		\$78.75 E	Filing Fee & d Copy	\$87.50 Filing Fec, Certificate of Status & Certified Copy



### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 7, 2010

THOMAS TROESKEN 33 FAIR STREET NEWNAN, GA 30263

SUBJECT: SPRING STREET INTERIORS, INC.

Ref. Number: W10000017088

RECEIVED APR 1 9 7000

We have received your document for SPRING STREET INTERIORS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II

Letter Number: 910A00008540

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

Spring St	reet Interiors, Inc.				
(Enter name of c	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	ED,"	"COMPANY," "CORPORATION,"		
(If name unavai	lable in Florida, enter alternate corporate na	me ac	lopted for the purpose of transacting business in Florida		
Georgia		3	26-1845071		
	under the law of which it is incorporated)	J	(FEI number, if applicable)		
1/29/2008	3	ς F	Perpetual		
	(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")		
			Florida, if prior to registration) 2, F.S., to determine penalty liability)		
33 Fair St					
33 Fair St	(SEE SECTIONS 607.1501 & 607	7.150	2, F.S., to determine penalty liability)		
33 Fair St	(SEE SECTIONS 607.1501 & 607 reet, Newnan, GA 30263	7,150 addre	2, F.S., to determine penalty liability) ss)		
	(SEE SECTIONS 607.1501 & 607 reet, Newnan, GA 30263 (Principal office a	7,150 addre	2, F.S., to determine penalty liability) ss)		
General C	(SEE SECTIONS 607.1501 & 607 reet, Newnan, GA 30263  (Principal office a (Current mailing a	7,150 addre	2, F.S., to determine penalty liability) ss)		
General C	(SEE SECTIONS 607.1501 & 607 reet, Newnan, GA 30263  (Principal office a (Current mailing a Contracting	7,150 addre	2, F.S., to determine penalty liability)  ss)  ss)  ntry to be carried out in state of Florida)		
General C	(SEE SECTIONS 607.1501 & 607. reet, Newnan, GA 30263  (Principal office a  (Current mailing a	7,150 addre	2, F.S., to determine penalty liability)  ss)  ss)  ntry to be carried out in state of Florida)		
General C (Purpose(	(SEE SECTIONS 607.1501 & 607.  reet, Newnan, GA 30263  (Principal office a  (Current mailing a  Contracting s) of corporation authorized in home state of et address of Florida registered agent: (1)	7,150 addre	2, F.S., to determine penalty liability)  ss)  ss)  ntry to be carried out in state of Florida)		
General C (Purpose)  Name and streethers	(SEE SECTIONS 607.1501 & 607.1501	7,150 addre	2, F.S., to determine penalty liability)  ss)  ss)  ntry to be carried out in state of Florida)		

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.

11. 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.

12. Names and business addresses of officers and/or directors:

Α.	DI	RE	CT	О	RS
----	----	----	----	---	----

Chairman: _				
Address:		<u> </u>	22	
<del></del>		至高	APR	<del>- 11</del>
Vice Chairma	nn;	<u> </u>	9	
Address:	· · · · · · · · · · · · · · · · · · ·	<u></u>	-7L	0
			<del>t.</del>	
Director:	·		2	
Address:		<del></del>	<u>.                                  </u>	
				<del></del>
Director:				
Address:			<del></del>	
			<del></del>	
B. OFFICE				
	homas J. Troesken			
Address: 33	3 Fair Street			
N	ewnan, GA 30263			
Vice Presider	Thomas J. Troesken			
Address: 33	3 Fair Street		<u> </u>	
<u>N</u>	ewnan, GA 30263			
Secretary: C	Charles Kevin Dumas			
Address: 33	3 Fair Street, Newnan, GA 30263			
Treasurer:				
Address:				
NOTE: Sta	necessary, you may attach an addendum to the application listing additional officers and/or di	rectors.	r	
13	(Signature of Director or Officer listed in number 12 of the application)			
14.	THOMAS J. TROFCKEN President	<b>}-</b> -		
A T	(Typed or printed name and capacity of person signing application)			

Control No. 08007744

# STATE OF GEORGIA

# Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

# CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

## SPRING STREET INTERIORS, INC.

### **Domestic Profit Corporation**

was formed or was authorized to transact business on 01/29/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 29th day of March, 2010

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 5575286-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp