

F11000001504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2011 APR -6 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-17707

T. Burch APR 7 2011

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: FIRE SPRINKLER INSPECTIONS, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MATTHEW JONES

Name of Person

FIRE SPRINKLER INSPECTIONS, INC.

Firm/Company

3433 LITHIA PINECREST ROAD, # 301

Address

VALRICO, FLORIDA 33596

City/State and Zip code

MATT@FIRESPRINKLERINSPECTIONSINC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIA HALL

Name of Person

at (813) 657-9865

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
11 APR -6 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 29, 2011

MATTHEW JONES
3433 LITHIA PINECREST ROAD #301
VALRICO, FL 33596

SUBJECT: FIRE SPRINKLER INSPECTIONS, INC.
Ref. Number: W11000017707

We have received your document for FIRE SPRINKLER INSPECTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type or print the name and address of the registered agent in number 9 of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tim Burch
Regulatory Specialist II

Letter Number: 611A00007580

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.

2011 APR - 8 PM 4: 41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

1. FIRE SPRINKLER INSPECTIONS, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. WYOMING

(State or country under the law of which it is incorporated)

3.

(FEL number, if applicable)

4. FEBRUARY 7, 2011

(Date of incorporation)

5.

PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2710 THOMES AVE., CHEYENNE, WY 82001

(Principal office address)

2710 THOMES AVE., CHEYENNE, WY

(Current mailing address)

8. TRANSACT ANY LAWFUL BUSINESS

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name:

MARY CALLENDER

Office Address:

2825 FALLING LEAVES DRIVE

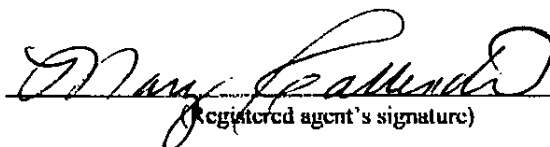
VALRICO, Florida 33596-5771

(City)

(Zip code)

10. 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)

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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: MATTHEW JONES

Address: 3433 LITHIA PINECREST ROAD, # 301

VALRICO, FL 33596

Director: _____

Address: _____

B. OFFICERS

President: MATTHEW JONES

Address: 3433 LITHIA PINECREST ROAD, # 301

VALRICO, FL 33596

Vice President: JULIA HALL

Address: 3433 LITHIA PINECREST ROAD, # 301, VALRICO, FL 33596

Secretary: MATTHEW JONES

Address: 3433 LITHIA PINECREST ROAD, # 301, VALRICO, FL 33596

Treasurer: MATTHEW JONES

Address: 3433 LITHIA PINECREST ROAD, # 301, VALRICO, FL 33596

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. MATTHEW JONES / DIRECTOR / PRESIDENT

(Typed or printed name and capacity of person signing application)

FILED
2011 APR - 6 PM 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF WYOMING
Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby
certify that the filing requirements for the issuance of this certificate have been fulfilled.

CERTIFICATE OF INCORPORATION

Fire Sprinkler Inspections, Inc.

FILED
2011 APR -6 PM 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Accordingly, the undersigned, by virtue of the authority vested in me by the law, hereby
issues this Certificate.

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official
certificate at Cheyenne, Wyoming on this **7th** day of **February, 2011**.



Filed Date: 02/07/2011

Max Maxfield
Secretary of State

By: Machá Bowman