

F12000004568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

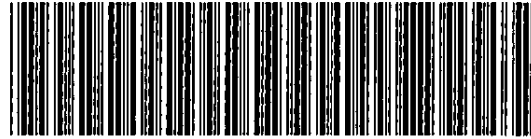
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800241041868

10/22/12--01048--008 \*\*70.00

12 NOV -8 PM 1:39  
TALLAHASSEE, FLORIDA

W12-54174

11/09/12



12 NOV -8 PM 12: 05

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 23, 2012

BARBARA C. SAPPENFIELD  
BCS RENTALS, INC.  
6858 SWINNEA ROAD, 5 RUTLAND PLACE  
SOUTHAVEN, MS 38671

SUBJECT: BCS RENTALS, INC.  
Ref. Number: W12000054174

We have received your document for BCS RENTALS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

It appear that the U. S. Post Office damaged your application; the signature of the Registered Agent is now incomplete. Please resign a new document.

Please return the corrected original and one copy of 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) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 812A00026010

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** BCS Rentals, 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:

Barbara C. Sappenfield

Name of Person

BCS Rentals, Inc.

Firm/Company

6858 Swinnea Road, 5 Rutland Place

Address

Southaven, MS 38671

City/State and Zip code

eric@ericsappenfield.com

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

For further information concerning this matter, please call:

Eric L. Sappenfield

Name of Person

at ( 662 ) 349-8344

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

**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.*

1. BCS Rentals, Inc.

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

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

2. Mississippi

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

3. 64-0818626

(FEI number, if applicable)

4. April 20, 1992

(Date of incorporation)

5. Perpetual

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

6. \_\_\_\_\_

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

7. 6858 Swinnea Road, 5 Rutland Place, Southaven, MS 38671

(Principal office address)

6858 Swinnea Road, 5 Rutland Place, Southaven, MS 38671

(Current mailing address)

8. Condo Rentals

(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: Richard McNeese

Office Address: 36468 Emerald Coast Pkwy, Ste 1201

Destin

(City)

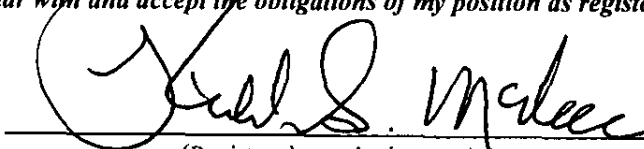
, Florida 32541

(Zip code)

12:07-8 PM 11-30  
FALL 1992  
FALL 1992

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: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: Barbara C. Sappenfield

Address: 6620 Swinnea Road  
Southaven, MS 38671

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: Barbara C. Sappenfield

Address: 6620 Swinnea Road, Southaven, MS 38671

Treasurer: Barbara C. Sappenfield

Address: 6620 Swinnea Road, Southaven, MS 38671

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

13. Barbara C. Sappenfield

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. Barbara C. Sappenfield

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

**State of Mississippi**  
**Office of the Secretary of State**  
**C. Delbert Hosemann, Jr., Secretary of State**  
**Jackson, Mississippi**

**CERTIFICATE**

I, C. DELBERT HOSEMAN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on April 20, 1992, the State of Mississippi issued a Charter/Certificate of Authority to:

BCS RENTALS, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.



Given under my hand  
and seal of office  
September 24, 2012

*C. Delbert Hosemann, Jr.*

C. Delbert Hosemann, Jr.  
Secretary of State

12 NOV -8 PM 1:30  
TALLAHASSEE, FLORIDA