

FI6000004384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

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Reg+

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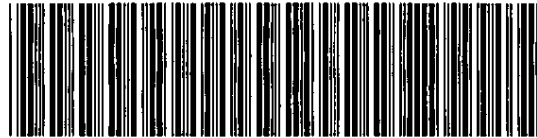
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cert

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Office Use Only



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08/23/16--01029--001 **78.75

16 SEP 30 AM 9:25
DIVISION OF CORPORATIONS

FILED

O SIMMONS

OCT 03 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 25, 2016

CHRIS PICKRELL
10134 HAMMERLY BLVD, STE 144
HOUSTON, TX 77080

SUBJECT: CAP CAPITAL MANAGEMENT, INC.
Ref. Number: W16000059048

2016 SEP 30 PM 12:34
MAIL ROOM

We have received your document for CAP CAPITAL MANAGEMENT, 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.

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) 245-6051.

Octavia I Simmons
Regulatory Specialist II
Registration Section

Letter Number: 916A00018137

Corrected as noted. Thank you.
OSP

COVER LETTER

TO: Registration Section
Division of Corporations
CAP Capital Management, Inc

SUBJECT: _____
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:
Chris Pickrell

Name of Person
CAP Capital Management, Inc

Firm/Company
10134 Hammerly Blvd, Suite 144

Address
Houston, TX 77080

City/State and Zip code
Chris@CAPHomeSolutions.com

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

For further information concerning this matter, please call:

Chris Pickrell 832 649-8722

Name of Person at () Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration 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.*

CAP Capital Management, Inc.

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

CAP Home Solutions, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Texas 47-5095003

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
August 31, 2016 perpetual

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
Pending

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
10134 Hammerly Blvd, Suite 144, Houston, TX 77080

7. _____
(Principal office address)

(Current mailing address, if different)

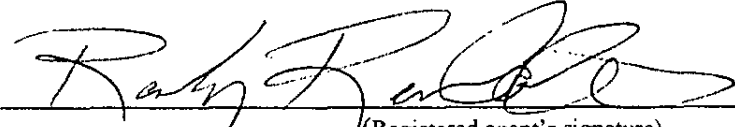
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Randy Rainbolt

Name: _____
1500 Elmwood Street

Office Address: _____ 33755
Clearwater _____, Florida _____
(City) (Zip code)

9. 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)

10. 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.

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16 SEP 30 AM 9:25
DIVISION OF CORPORATIONS

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

A. DIRECTORS

Chris Pickrell

Chairman:

10134 Hammerly Blvd, Suite 144

Address:

Houston, TX 77080

Christina Pickrell

Vice Chairman:

10134 Hammerly Blvd, Suite 144

Address:

Houston, TX 77080

Director:

Address:

Director:

Address:

B. OFFICERS

Chris Pickrell

President:

10134 Hammerly Blvd, Suite 144

Address:

Houston, TX 77080

Vice President:

Address:

Secretary:

Address:

Christy Pickrell

Treasurer:

10134 Hammerly Blvd, Suite 144, Houston TX 77080

Address:

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

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. Chris Pickrell, President and Director

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

FILED
16 SEP 30 AM 9:25
DIVISION OF CORPORATIONS

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Carlos H. Cascos
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CAP Capital Management, Inc. (file number 802277545), a Domestic For-Profit Corporation, was filed in this office on August 21, 2015.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 18, 2016.



A handwritten signature in black ink, appearing to read "Cascos", followed by a horizontal line.

Carlos H. Cascos
Secretary of State

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



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Secretary of State

Office of the Secretary of State

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