

F1700001827

(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



800297129678

04/21/17--01019--001 **70.00

APR 24 2017
S. YOUNG

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
17 APR 21 PM 12:09

COVER LETTER

TO: Registration Section
Division of Corporations
Brooks Ag Co., 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:
Barrett Brooks

Name of Person
Brooks Ag Co., Inc.

Firm/Company
500 W Main Street

Address
Samson, AL 36477

City/State and Zip code
bbrooks@brookscountry.net

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

For further information concerning this matter, please call:

Jennifer Watkins 334 9974052

Name of Person Area Code 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

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
17 APR 21 PM 12:09

**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.*

Brooks Ag Co., Inc.

1. _____
(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)
AL 630729682

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
June 28, 1977

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

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
500 W Main Street, Samson, AL 36477

7. _____
(Principal office address)

(Current mailing address, if different)

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

Barrett Brooks

Name: _____

445 Western Lake Drive

Office Address: _____

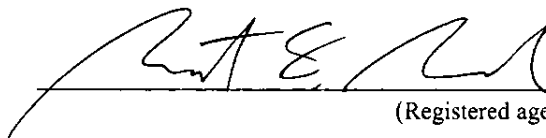
Santa Rosa Beach

32459

_____, 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.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 APR 21 PM 12:09

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

A. DIRECTORS

Barrett Brooks
Chairman: _____
500 W Main Street
Address: Samson, AL 36477

Jordan Brooks
Vice Chairman: _____
500 W Main Street
Address: Samson, AL 36477

Fleming Brooks
Director: _____
500 W Main Street
Address: Samson, AL

Director: _____
Address: _____

B. OFFICERS

Barrett Brooks
President: _____
500 W Main Street
Address: Samson, AL 36477

Vice President: _____
Address: _____

Secretary: _____
Address: _____

Treasurer: _____
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. Barrett Brooks, President
(Typed or printed name and capacity of person signing application)

FILED
STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
17 APR 21 PM 12:09

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Brooks AG Co., Inc. was formed in Geneva County, Alabama on June 28, 1977. The Alabama Entity Identification number for this entity is 046-633. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.

17 APR 21 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



20170417000024398

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

04/17/2017

Date

J. H. Merrill

John H. Merrill

Secretary of State