

F18000002271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

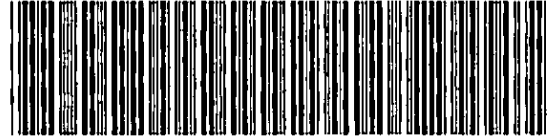
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

day Duncan
called ok for
me to correct
#13 on app. nyc
5/15/16

Office Use Only



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F18-2272

03/19/18--01019--012 **70.00

N. CAUSSEAU

MAY 15 2018

1180000026696

COVER LETTER

TO: Registration Section
Division of Corporations
Southeast Pump Specialist, 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:
Jay W Duncan

_____	Name of Person
Southeast Pump Specialist, Inc.	Vickery T. Dye
_____	Firm/Company
3020 Reynolds Rd Bays 4-5	PO Box 2447
_____	Address
Lakeland, FL 33803	Evans, GA 30809
_____	City/State and Zip code
jayd@sepump.net	

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

For further information concerning this matter, please call:

Jay W Duncan	706	772-2030
_____	at (_____)	_____
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:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|--|--|---|---|



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 20, 2018

JAY W DUNCAN
3020 REYNOLDS RD BAYS 4-5
LAKELAND, FL 33803 US

SUBJECT: SOUTHEAST PUMP SPECIALIST, INC.
Ref. Number: W18000026696

We have received your document for SOUTHEAST PUMP SPECIALIST, 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 signature in number 12 must be the printed name of the person in number 13,

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.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 618A00005576

**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.*

Southeast Pump Specialist, 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)
Georgia 02-0718253

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
March 2004 Perpetual

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)
1864 Tobacco Rd. Augusta GA 30906

7. _____
(Principal office address)

(Current mailing address, if different)

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

Vickery T Dye

Name: _____

3020 Reynolds Road

Office Address: _____

Lakeland, FL

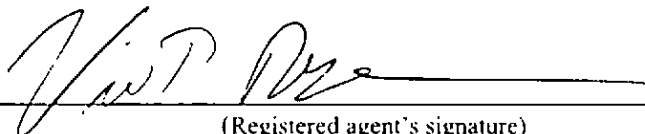
33803

(City)

_____, Florida _____
(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.

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

A. DIRECTORS

Chairman: Vickery T Dye
PO Box 2447

Address: Evans, GA 30809

Vice Chairman: Billy Parnell
3387 SC Hwy 395

Address: Newberry, SC 29108

Director: Jay W Duncan
617 Burgamy Pass

Address: Grovetown GA 30813

Director:

Address:

B. OFFICERS

President: Vickery T Dye
PO Box 2447

Address: Evans, GA 30809

Vice President: Billy Parnell
3387 SC Hwy 395

Address: Newberry, SC 29108


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. Jay W Duncan, CFO

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

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brian P. Kemp**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

SOUTHEAST PUMP SPECIALIST, INC.
a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. 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.

Docket Number : 15510107
Date Inc/Auth/Filed: 03/04/2004
Jurisdiction : Georgia
Print Date : 03/14/2018
Form Number : 211



Brian P. Kemp
Secretary of State