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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/12/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C & B TAX INCORPORATED

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:

CHERI BRYANT

Name of Person

C & B TAX INCORPORATED D. B. A. JACKSON HEWITT

Firm/Company

361 SOUTHWEST DR. #137

Address

JONESBORO, AR 72401

City/State and Zip code

CHERTAX@GMAIL.COM

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

For further information concerning this matter, please call:

CHERI BRYANT

501 412-2292

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:

- ☐ \$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.*

C & B TAX INCORPORATED

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

C & B TAX INC.

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

2. STATE OF ARKANSAS 3. 71-0817462
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/9/1998 5. PERPETUAL
(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)

7. 3229 S. CARAWAY RD. JONESBORO, AR 72404 4711 66th St. N. Kenneth City FI 33709
(Principal office address)

3229 S. CARAWAY RD JONESBORO, AR 72404
(Current mailing address, if different)

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

Name: Michael Llewellyn

Office Address: 1337 Viewtop Dr
Clearwater, Florida 33764
(City) (Zip code)

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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.

Michael Llewellyn
(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: CHERI BRYANT

Address: 5404 HOLLOW CREEK LANE

JONESBORO, AR 72404

Vice President: L. J. BRYANT II

Address: 1010 WILDBERRY COVE

JONESBORO, AR 72404

Secretary: CHERI BRYANT

Address: 5404 HOLLOW CREEK LANE JONESBORO, AR 72404

Treasurer: L. J. BRYANT II

Address: 1010 WILDBERRY COVE JONESBORO, AR 72404

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

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.

CHERI BRYANT

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



**Arkansas Secretary of State
Mark Martin**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, Mark Martin, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

C & B TAX INCORPORATED

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office December 9, 1998.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 28th day of November 2018.

Mark Martin

Mark Martin

Secretary of State

Online Certificate Authorization Code: a76eba15785b5cc

To verify the Authorization Code, visit sos.arkansas.gov