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DATE:

10/14/19

NAME:

BRANDON SERVICE COMPANY, INC.

TYPE OF FILING: APPLICATION

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2019

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: BRANDON SERVICE COMPANY, INC.
Ref. Number: W19000091361

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

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Please return 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.

Yvette Scott Document Specialist II

Letter Number: 919A00021199

Hello Please see the attached corrected document. Please date the filing with the original date of submission. Thanking

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.

	CORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
BRANDON BOILER SERVICE C	COMPANY
(If name unavailable in Florida, enter alternate	e corporate name adopted for the purpose of transacting business in Florida)
2. MISSISSIPPI	3TALI
(State or country under the law of which it is	incorporated) (FEI number, if applicable)
4. <u>02/27/1976</u>	(Date of duration, if other than perpetual)
	(Date of duration, if other than perpetual)
6. JULY 1, 2019	reported hypinges in Florida (Faire and action)
(SEE SECTIONS 6	nsacted business in Florida, if prior to registration) 07.1501 & 607.1502, F.S., to determine penalty liability)
7. 4769 I 55 SOUTH, JACK	SON, MS 39212
	(Principal office address)
PO BOX 720716 BYRAM, MS 39272	
	(Current mailing address, if different)
8. Name and street address of Florida registe	ered agent: (P.O. Box <u>NOT</u> acceptable)
Name: PARACORP INCORE	PORATED
Office Address: 155 Office Plaza Drive, 1s	t Floor
Tallahassee	, Florida _32301
(City)	(Zip code)
designated in this application, I hereby acce further agree to comply with the provisions	to accept service of process for the above stated corporation at the place of the appointment as registered agent and agree to act in this capacity. It of all statutes relative to the proper and complete performance of my e obligations of my position as registered agent.
PLEASE SEE ATTA	CHED CONSENT (Registered agent's signature)
10. Attached is a certificate of existence duly the Department of State, by the Secretary of S	authenticated, not more than 90 days prior to delivery of this application to 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 Chainnan: WILLIAM BOUNDS Address: 375 HERITAGE PLACE, JACKSON, MS 39212 Vice Chairman: Address: Address: _ Director: Address: _ **B. OFFICERS** President: WILLIAM BOUNDS Address: 375 HERITAGE PLACE, JACKSON, MS 39212 Vice President: Address: Secretary: _ Address: _ 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. 13. WILLIAM BOUNDS/PRESIDENT

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

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 10/14/2019

ENTITY NAME: BRANDON SERVICE COMPANY, INC.

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated



DELBERT HOSEMANN Secretary of State

Office of the Secretary of State Jackson, Mississippi

Certificate of Good Standing

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

That on the 27th day of February, 1976, the State of Mississippi issued a Charter/Certificate of Authority to:

BRANDON SERVICE COMPANY, 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.

That insofar as the records of this office are concerned, the said BRANDON SERVICE COMPANY, INC. is in good standing at this time.

Given under my hand and seal of office the 11th day of October, 2019

C. Delbert Hosemann, Jr. Secretary of State

Certificate Number: CN19072474

Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx