

F20000002568

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

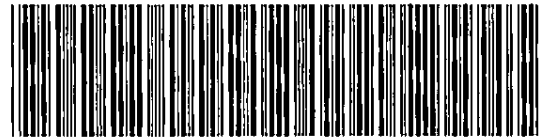
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 JUN -9 PM 1:15
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JUN 10 2020
M. SOLOMON

JUN 10 2020

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EDEN HOME SERVICES CORP.
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:

Ty ANDERSON
Name of Person
EDEN HOME SERVICES CORP.
Firm/Company
5001 N WHEELING AVE
Address
MUNCIE, INDIANA 47304
City/State and Zip code
tanderson@edenhomeservices.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ty ANDERSON at (765) 876-8175
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☐ \$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.

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

~~EDEN HOME SERVICES CORPORATION~~ EDEN SERVES CORP.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. INDIANA 3. 82-2975432
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/1/2017 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)

7. 5001 N WHEELING AVE MUNCIE, IN 47304
(Principal office street address)

(Current mailing address, if different)

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

Name: REGISTERED AGENTS INC.

Office Address: 7901 4TH ST N STE 300

ST PETERSBURG, Florida 33702
(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.

Bill Howe
(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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2023 JUN -9 PM 1:15
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

A. DIRECTORS

☐ Chairman Name: TY ANDERSON

☐ Vice Chairman Address: 2705 W SACRAMENTO DR.

☐ Director MUNCIE, IN 47303

☒ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: CALEB MILLER

☐ Vice Chairman Address: 3060 W MARKET ST

☐ Director LIBERTY CENTER, IN 46766

☐ President _____

☒ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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. TY ANDERSON PRESIDENT / OWNER

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

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

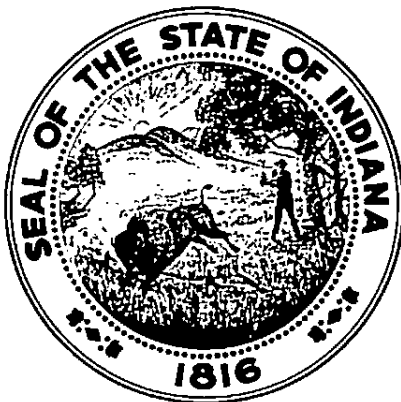
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

EDEN HOME SERVICES CORP

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on October 01, 2017, and was in existence or authorized to transact business in the State of Indiana on April 29, 2020.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, April 29, 2020

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

201710011216792 / 20201408912

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on May 29, 2020.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 7, 2020

TY ANDERSON
EDEN HOME SERVICES CORP.
5001 N. WHEELING AVE.
MUNCIE, IN 47304

SUBJECT: EDEN HOME SERVICES CORP
Ref. Number: W20000045331

We have received your document for EDEN HOME SERVICES CORP and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

The suffix does not make a distinguishable difference, just fyi.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 620A00009380

RECEIVED

JUN 9 2020