M15000004444

(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:					
JUN - 8 2015					
WUN - 8 2015 A. DUNLAR					
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COVER LETTER

	lew Filing Secti Division of Corp						
SUBJEC	T: Sprow	tt Inc					
Name of corporation - must include suffix							
Dear Sir o	or Madam:						
"Certifica	ite of Existence	on by Foreign Corporation f " or "Certificate of Good S corporation to transact bus	tanding" ar	id check are sub			
Please ret	urn all correspo	ondence concerning this ma	iter to the fo	ollowing:			
		Mark R	Jones				
	·	Name	of Person				
		Sprow	tt Inc_				
	· · · · · · · · · · · · · · · · · · ·		ompany				
		810 Red /	Ash Co	urt			
			ldress		•		
		Seffner	FL 33	584			
		· ·	e and Zip co				
		mjones@s E-mail address: (to be use					
		E-mail adoress: (to be use	o for future	annuai report i	offication)		
For further	er information o	oncerning this matter, pleas	se call:				
Mark	R Jones	_ _{at (} 813	, 43	6-6988			
1	Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed	is a check for t	he following amount:					
\$70.00	0 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		Filing Fee & ed 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.

Sprowtt Inc.

·						
	f corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"				
(If name unave	ailable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)				
Delaware 3.		80-0806486				
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	_			
April	3rd 2012 _{5.}					
(Da	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")		_			
Jun	e 1, 20 <u>15</u>					
		n Florida, if prior to registration) 502. F.S., to determine penalty liability)	-			
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 16192 Coastal Hwy. Lewes, DE 19958					
	(Principal office add	-	_			
	810 Red Ash Court Seff	ner FL 33584	_ •			
	(Current mailing add	ress)) (개			
. Name and <u>str</u>	reet address of Florida registered agent: (P.0	O. Box NOT acceptable)	MAY 29			
Name:	Mark R Jones		:			
office Address:	810 Red Ash Court		ि २ ≟ ३:			
	Seffner FL	, Florida 33584	<u>ီ</u> <u>ယ</u>			
	(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.

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

A. DIRECTO	Marile D. James As its only Officer and Dir	ector
Address:	910 Dad Ash Court	
Address.	Seffner Fl. 33584	
Vice Chairman:	:	
Address:		
)irector:		
\ddress:		
		हिल ज
irector;		
ddress:		20 E
OFFICER	· · · · · · · · · · · · · · · · · · ·	
		<u> </u>
ddress:		
		
ice President:		
ddress:	· · · · · · · · · · · · · · · · · · ·	
ecretary:		
ddress:		
easurer:		
ddress:		
	cessary, you may attach an addendum to the application listing add	Personal Community Programme
2.	essary, you may attach an addendum to the application listing add	altional officers and/or directors.
	Signature of Director or Officer	
e true and the	director signing this document (and who is listed in number 12 ab at he or she is aware that false information submitted in a docume felony as provided for in s.817.155, F.S.	ove) affirms that the facts stated herein ent to the Department of State constitutes
3.	MARK R JONES	
-·	(Typed or printed name and capacity of person signing a	application)

Department of State: Division of Corporations

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Entity Details

File Number:

5134098

Incorporation Date

04/03/2012

/ Formation Date:

(mm/dd/yyyy)

Entity Name:

SPROWTT INC CORPORATION

Entity Type: **GENERAL**

Entity Kind: Residency:

DOMESTIC

State: DE

REGISTERED AGENT INFORMATION

Name:

HARVARD BUSINESS SERVICES, INC.

Address:

16192 COASTAL HWY

City:

LEWES

SUSSEX County:

State:

DE

Postal Code: 19958

Phone:

(302)645-7400

Additional Information is available for a fee. You can retrieve Status for a fee of \$10.00 or

more detailed information including current franchise tax assessment, current filing history and more for a fee of \$20,00.

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