## P11000063703

(Requestor's Name)				
(Address)				
(Address)				
(City	/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
	. <b></b>			

Office Use Only



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SECRETARY OF STATE
ALLAHASSEE FLORID

MRD 7/15

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## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: SPR CONSTRUCTION SERVICES, INC.					
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )				
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:				
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certificate Of Status ADDITIONAL COPY REQUIRED				
FROM: SEVEN ROVE!  Name (Printed or typed)					
450 PLCYSXIA CT. Address					
City, State & Zip					
3al - aar Daytime Te	7.2322 elephone number				
E-mail address: (to be used	est a General Comport notification)				

NOTE: Please provide the original and one copy of the articles.



## RECEIVED 11 JUL 13 AN 10: 19

FLORIDA DEPARTMENT OF STATE FLORIDA
Division of Corporations

July 5, 2011

STEVEN ROWELL 456 BUCKSKIN CT WINTER SPRINGS, FL 32708

SUBJECT: SPR CONSTRUCTION SERVICES, INC.

Ref. Number: W11000035590

We have received your document for SPR CONSTRUCTION SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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) 245-6879.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 111A00015989

July 12, 2011

11 JUL 13 PH 2 29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Florida Department of State

**Division of Corporations** 

Subject: SPR Construction Services, Inc.

Reference Number: W11000035590

We are the original owners of the business name, SPR Construction Services, Inc. and filed for dissolution on June 22, 2011. We have no intention of revoking the dissolution and would like to release the name. Therefore, we are filing to re-open the corporation using the same name of SPR Construction Services, Inc. Thank you for your attention to this matter.

Sincerely,

Steve Rowell

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME				
The name of the corporation shall be:	36 t Mekro	rse rox	COSTIC.	
ARTICLE II PRINCIPAL OF				
Principal stre		Ma	ailing address, if different i	s:
456 Bicks	tin Cart			
winter sory	T. 20			<del> </del>
32-10				
ARTICLE III PURPOSE				
The purpose for which the corporation	n is organized is:			
for profit:	-	-: -	C-0815 CL	<b>~</b>
401 KOH14.	10 OHAS 20	ones "	COMMON	<b>M</b> ),
				•
ARTICLE IV SHARES				
The number of shares of stock is: /C	<i>O</i> c			
ARTICLE V INITIAL OFFICE	ERS AND/OR DIRECTOR	S	_	
Name and Title:			man Rune	11 vice gesiden
<del></del>	rskin C <del>J</del>	_ Address: 🔟	20 propertion	<i>Œ</i> .
O'Utes	32°C2'CC	_	WHE SOUTH	FC
	3 <u></u>		3-4-0	
Name and Title:	(**	Name and Title:		
Address:		Address:		
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				·····
Name and Title:		Name and Title:		
A 3 4		A 11		<del></del>
		_		· · · · · · · · · · · · · · · · · · ·
ARTICLE VI REGISTERED	AGENT			
The name and Florida street address		the registered agent	is:	• .:
Name: Steveo			<b>2</b> 9	
Address: USOR	erskin G		든없	<u> </u>
CONTRC	5000 EC 3340	K	圣而	
ARTICLE VII INCORPORATO	)R		\$ A	- Ta
The name and address of the Incorpor	<del></del>		SEC	- 60
Name: Steve	<u>Raizell</u>	-	mo m	
Address: 45034	issum Ct	~~		
(C) OHEC	350083°05.29-4	$\mathcal{L}$	2	2 2
Having been named as registered age	ent to accent service of process	for the above states	d corporation at the place	designated in
this certificate, I am familiar with and				
		-	1 1	
			6/28/11	
Required Si	ignature/Registered Agent		Dat	ie .
I submit this document and all the	and the foods stated bearing	tora I aus accour 4	hat the false information	cubmitted in a
I submit this document and affirm the document to the Department of State c				suvinuiçu in ü
S - S - S - S - S - S - S - S - S - S -		province joi in s	1 1	
			lolaxl	1.1
Required	Signature/Incorporator		4/43 p	ate