

P210 00058479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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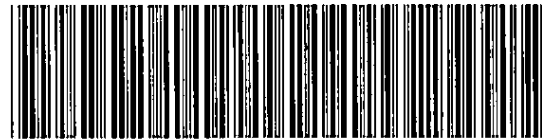
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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21 JUN 16 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D O'KEEFE
JUN 22 2021

COVER LETTER

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

SUBJECT: Springs County Construction Company.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Scott Rosenboom
Name (Printed or typed)

19802 NW 190th AVE
Address

High Springs, FL 32643
City, State & Zip

352-538-3877
Daytime Telephone number

rosenboom.scott@YAHOO.COM
E-mail address: (to be used for future annual report notification)

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

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: Springs County Construction Company

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
19802 NW 190th Ave

Mailing address, if different is:

High Springs FL 32643

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to Build new homes, remodle work,
comercial build outs & NEW COMERCIAL CONSTRUCTION.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Scott Rosenboom Pres

Name and Title: MELISA Kim Rosenboom Vice

Address: 19802 NW 190th Ave
High Springs FL
32643

Address: 19802 NW 190th Ave
High Springs FL
32643

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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TALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Melisa Kim Rosenboom

Address: 19802 NW 190th AVE
High Springs FL 32643

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Scott Rosenboom

Address: 19802 NW 190th AVE
High Springs FL 32643

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:

Melisa Kim Rosenboom
Required Signature/Registered Agent

6/13/21
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Scott Rosenboom
Required Signature/Incorporator

Date 6/13/21