

P240000 19606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

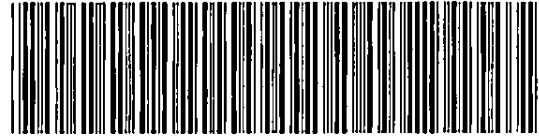
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FLORIDA FILING & SEARCH SERVICES, INC.

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PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 03/18/2024

NAME: SB O&P INC

TYPE OF FILING: ARTICLES

COST: 70.00

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



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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: SBOP HOLDING, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4147 Sun N Lake Blvd
Sebring, FL 33872

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

This corporation is organized for the purpose of conducting any and all lawful business for which a corporation may be incorporated.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARK SELLECK, PRESIDENT

Name and Title: _____

Address 4147 Sun N Lake Blvd
Sebring, FL 33872

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF COURT
HILLSBOROUGH COUNTY, FL

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: MARK SELLECK

Address: 4147 SUN N LAKE BLVD
SEBRING, FL 33872

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARK SELLECK

Address: 4147 SUN N LAKE BLVD
SEBRING, FL 33872

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.

Mark Selleck

Required Signature/Registered Agent

3/18/2021

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.

Mark Selleck

Required Signature/Incorporator

3/18/2021

Date

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