

To: 347.016
Division of Corporations

2019-11-07 05:26:57 ST

959080800 From: Ranae McGraw

F19000005090

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (350) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 880-3338
Fax Number : (954) 209-0945

Please honor original
date 10/31/2019

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
DMN, INCORPORATED

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$1,328.75

19 OCT 31 AM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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850-617-6381

11/6/2019 10:35:41 AM PAGE 1/001 Fax Server



November 6, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: DMN, INCORPORATED
REF: W19000097853

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,250.00.

Please return 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) 245-6051.

Yvette Scott
Document Specialist II

FAX Aud. #: H19000322115
Letter Number: 919A00022907


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. DMN Incorporated
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. DMN of Florida Incorporated
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
3. Tennessee
(State or country under the law of which it is incorporated)
4. 62-1600760
(FBI number, if applicable)
5. 04/21/1995
(Date of incorporation)
6. 06/14/2014
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 220 S WOODS ST, WEST MEMPHIS, AR 72301-4304 USA
(Principal office address)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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.

By:  CT Corporation System
Peter Trawinski
Assistant Secretary
(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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Wim Komdorffer

Address: Gieterij 3, 2211 WC

Noordwijkerhout, Netherlands

Vice President: _____

Address: _____

Secretary: Coos Van Loenen

Address: Gieterij 3, 2211 WC Noordwijkerhout, Netherlands

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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. Coos Van Loenen, Secretary

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

FILED



Tre Hargett
Secretary of State

19 OCT 31 AM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Division of Business Services
Department of State
State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

WOLTERS KLUWER
118 W EDWARDS STE 200
SPRINGFIELD, IL 62704

October 14, 2019

Request Type: Certificate of Existence/Authorization
Request #: 0334184

Issuance Date: 10/14/2019
Copies Requested: 1

Document Receipt

Receipt #: 005061301

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3767492723

\$20.00

Regarding: DMN, INCORPORATED

Filing Type: For-profit Corporation - Domestic

Formation/Qualification Date: 04/21/1995

Status: Active

Duration Term: Perpetual

Business County:

Control #: 293770

Date Formed: 04/21/1995

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

DMN, INCORPORATED

* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

* has filed the most recent annual report required with this office;

* has appointed a registered agent and registered office in this State;

* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

Processed By: Cert Web User

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