Florida Department of State

Division of Corporations Public Access System

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(((H08000213003 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM (SO FOR COMPANY)

Account Number : FCA000000023 Phone

: (850)222-1092

fax Number

: (850)878-5926

date of submission 9/11

FLORIDA/FOREIGN LIMITED LIABILITY CO.

DPI, LLC

L. SELLERS

OCT. - 62008

Certificate of Status Certified Copy Page Count Estimated Charge

EXAMINER

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September 12, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: DPI OF DELAWARE, LLC

REF: W08000042477

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.

You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida.,

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) 245-6967.

Leslie Sellers Regulatory Specialist II FAX Aud. #: H08000213003 Letter Number: 608A00049913

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08 OCT -3 PM 2: 05
SECRETARY OF STATE

RE-SUBMIT
Please retain original filing and of submission 9/1/

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

. We, the undertigned, do hereby certify the	it we are the Managers and/or Managing
Members of DPI, LLC	•
(Name of Limit	and Liability Company)
a limited liability company duly organized	and existing under the laws of
Delaware	_
(State or Country of Organization)	 '
Because the name of this foreign limited li	ability company does not satisfy the
requirements of the s. 608.406, F.S., the lis	nited liability company hereby adopts the
following name to transact business in the	state of Florida:
DPI of Delaware, LLC	· · · · · · · · · · · · · · · · · · ·
(Name to be used by limited liability company in Florida Company, L.L.C., or LLC.)	NOTE: Name must end with Limited Liability
Date: 10-1-08	
Signature(s) of Manager(s) and/or Managir	ng Member(s):
Chus Lewis	
18 Charles	Chris Lewis / President, menber Grant Palmer / Vice President, menber
	<u></u>
,	

CR18121 (7/07)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Name of Foreig	CC .			
DPI of	n Limited Limbility Company Delaware, LLC	y; must include "Limi	find Liability Company,""L.L.C.," or	PLC")
If name unavailable, e consent of the manager Company," "L.L.C.,"	cobe ersement grigantario e	or the purpose of tran sting the alternate nam	reacting business in Floride and attach no. The alternate name must include "	a copy of the written Limited Liability
. Del	aware	3 .	20-5063341	
(furisdiction under the company is niganize	o law of which foreign limite	ed Hability	20-5063341 (FEI aumber, If applicable)	
	_		percetual	
June 27	of Organization)		perpetual hation: Year limited liability company to "perpetual")	will cease to
i		N/A		
	(Dute first transacted bu (See sections 608.501 & 6	isiness in Florida, if p 608,502 F.S. to deter	mer to registration.) mine penalty liability)	,
	50	05 N. Stateline	Ave.	Minus Control of the
	Te	exarkana, TX 75	503	
	(Stg	met Address of Princi	big Duice)	**************************************
•	y company is a manager unal business addresses o		ny, check here [_] nëmbers or managers are as foil	lows:
Duane Cor	oran. #5 Hillcrest Te	xarkana, AR 71	854	
Chris Lewis	, 12919 Mallard Way	Houston, TX 77	7044	
Charact Date	er, 702 Charidges Dr	rive Houston, TX	K 77034	
Grant Pain	Millon, 9304 Danube	porether 90 days old	duly authorized by the official bavin	
Donald Mc Attached is an origin to jurisdiction under the	al certificate of costemen, no it slaw of which it is organized. (the under each of the translator)	(A photocopy is not a	ecoptable. If the certificate is in a foreign	jn language, a yr language, a
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Donald Me O Attached is an origin to jurisdiction under the modution of the certific	e law of which it is organized. (the under each of the tunelator) tess or purposes to be co	(A photocopy is not a must be submitted.)	oted in Florida:	Ju princinstis s
Donald Me O Attached is an origin to jurisdiction under the malation of the certific	e law of which it is organized. (the under each of the tunelator) tess or purposes to be co	(A photocopy is not a must be submitted) and ucted or promo	oted in Florida:	on language, a
Donald Me O Attached is an origin to jurisdiction under the modution of the certific	Elevation it is organized. Signature of a merube (to accordings with studies)	(A photocopy is not a must be submitted.) anducted or promote ectrical Contract con	oted in Florida: flor de representative of a member.	TALLAH
Donald Me O Attached is an origin to jurisdiction under the malation of the certific	Signature of a member of the secondary with secondary with southout an afternation water the per	(A photocopy is not a must be submitted.) anducted or promote ectrical Contract con	oted in Florida: for d representative of a member. secution of this electronic completion to from stand herein cop true; on — member	TALLA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Compa	any is:		
DPI, LLC	··		
If name unavailable, the alternate name to be DPI of Delaware, LLC	e used in the state	of Florida is:	
2. The name and the Florida street address of	of the registered a	gent and office are:	
CŤ	Corporation System		
•	(Name)		
. 1200 S	South Pine Island Ro	ad .	
Florida Street Addı	ress (P.O. Box <u>NOT</u>	ACCEPTABLE)	
Plantation	FL	33324	
	City/State/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Stututes.

T Comparation System

(Signature) Asst: Scep

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITE WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DPI, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF AUGUST, A.D. 2008.

AND I DO HEREBY FORTHER CERTIFY THAT THE ANNUAL TAXES RAVE NOT BEEN ASSESSED TO DATE.

4569114 8300

080841062

Harriet Smith Windson, Secretary of State AUTHENTICATION: 6768952

DATE: 08-01-08

You may verify this certificate online