MERIT FASTENERS CORE 2510 N. COUNTY ROAD 4: LONGWOOD, FL 32750-35	27
City/State/Zip Phone  Corporation NAME(S) & DOC	Office Use Only
1. OSO 8 - OSO - O (Corporation Name)  2. DGR Entry O(SCS, (Corporation Name)  3. (Corporation Name)	(Document #)    ADDOD32757144
4. (Corporation Name)  Walk in Pick up time  Mail out Will wait	(Document #)  Certified Copy  Photocopy  Certificate of Status
NEW FILINGS  ☐ Profit ☐ Not for Profit ☐ Limited Liability ☐ Domestication ☐ Other  OTHER FILINGS ☐ Annual Report ☐ Fictitious Name	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement
	Reinstatement Trademark Other  500A00017621





## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 26, 2000

DGR ENTERPRISES, LTD. ATTN; LINDA ROGERS SPRINKLE 2510 N. COUNTY ROAD 427 LONGWOOD, FL 32750-3599

We have received your document for DGR ENTERPRISES, LTD and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please find enclosed the correct application to get Limited Liability status on DGR ENTERPRISES, LTD. Please complete and sign the application and return it to my attention. The \$25.00 filing fee has been retained in this office, and an application for refund has been submitted for processing in the amount of \$61.25 for the General Partnership filing fee that was not needed.

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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 500A00017621

## STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the limited partnership as identified in the records of the Florida Department of State:
Insert limited partnership's Florida document number: A 990000 0178
Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.
2. Suffix adopted for the above named partnership: LLLP COMPILL &
3. The street address of its chief executive office:  (if different from current recorded address):  Application
4. The street address of principal office in Florida:  (if different from above)  The \$25
5. The limited partnership hereby elects to be a limited liability limited partnership.
6. The effective date of this filing shall be:  \( \sum \text{as of the date this document is filed with the Florida Secretary of State} \)  \( \sum \text{as of the date this document is filed with the Florida Secretary of State} \)  \( \sum \text{as of the date this document is filed with the Florida Secretary of State} \)  \( \sum \text{or} \)  \( \sum \text{a date later than the time of filing:} \)  \( \sum \text{as of the date this document is filed with the Florida Secretary of State} \)
7. The name and Florida street address of the partnership's agent for service of process:
The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.
Signed this day of
Typed or printed names of partners signing above:    Sound   F.   Soun
Filing Fee: \$25.00 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

INHS66(12/99)