

FO4000006084

2004 OCT 22 A 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

604-29426

AL

Office Use Only



300039420153

07/29/04--01016--014 **70.00

FILED**TRANSMITTAL LETTER**

2004 OCT 22 A 8:28

TO: Registration Section
Division of CorporationsSECRETARY OF STATE
TALLAHASSEE, FLORIDA**SUBJECT:** DMP CORPORATION

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

VICKY WORTHY

(Name of Person)

DMP CORPORATION

(Firm/Company)

400 BRYANT BLVD.

(Address)

ROCK HILL, SC 29732

(City/State and Zip code)

For further information concerning this matter, please call:

VICKY WORTHY

(Name of Person)

at (803) 324-2401

(Area Code & Daytime Telephone Number)

STREET ADDRESS:Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399**MAILING ADDRESS:**Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee☐ \$78.75 Filing Fee &
Certificate of Status☐ \$78.75 Filing Fee &
Certified Copy☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 2, 2004

VICKY WORTHY
400 BRYANT BLVD.
C/O DMP CORPORATION
ROCK HILL, SC 29732

SUBJECT: DMP CORPORATION
Ref. Number: W04000029426

FILED

2004 OCT 22 A 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for DMP CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The document must have original signatures.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 404A00048113

**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.

FILED

2004 OCT 22 A 8:28

1. DMP CORPORATION

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

SECRETARY OF STATE
TALLAHASSEE, FLORIDADMP CORPORATION OF SC

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NC

(State or country under the law of which it is incorporated)

3. 20-0506010

(FEI number, if applicable)

4. 1-1-4

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 400 BRYANT BLVD. ROCK HILL, SC 29732

(Principal office address)

SAME

(Current mailing address)

8. MANUFACTURER OF WASTE WATER TREATMENT SYSTEMS

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT CORPORATION SYSTEMS

Office Address: 1200 S. PINE ISLAND ROAD

PLANTATION

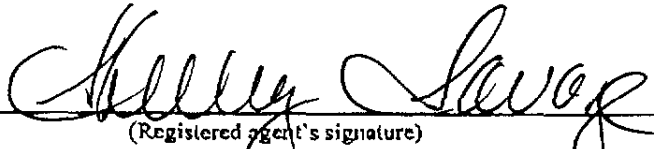
(City)

, Florida 33324

(Zip code)

10. 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.


(Registered agent's signature)

11. 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

FILED

2004 OCT 22 A 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**B. OFFICERS**President: MARK D. MASTERSAddress: 1495 ALTURA ROAD
FORT MILL, SC 29708Vice President: PAUL DUBINSKYAddress: 1550 MARY ELLEN
FORT MILL, SC 29708Secretary: SHARON HOFFMANAddress: 1806 FOREST LAKE DRIVE ROCK HILL, SC 29732

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. Sharon Hoffman Sharon Hoffman
(Signature of Director or Officer listed in number 12 of the application)14. SHARON HOFFMAN SECRETARY
(Typed or printed name and capacity of person signing application)



NORTH CAROLINA

Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

DMP CORPORATION

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 11th day of December, 2003, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 19th day of October, 2004

Elaine F. Marshall

Secretary of State