

F15000001632

(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:

APR 17 2015

A. DUNLAP

L09000010521

Office Use Only



000267305150

12/15/14--01028--001 **70.00

FILED

15 APR -9 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014000024715



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 APR -9 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 30, 2015

DOUGLAS R. RITTER
3200 WOODBERRY LN
2ND
SARASOTA, FL 34231

SUBJECT: DR PRO PRODUCTS, INC.
Ref. Number: W14000074715

We have received your document for DR PRO PRODUCTS, INC. 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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The name and document number of conflict is, "D R PRO PRODUCTS, LLC"-L09000010521.

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) 245-6052.

Carol Mustain
Regulatory Specialist II

Letter Number: 414A00026571

4/7/15

NOTE Accomodation to

DR PRO PRODUCTS, INC. / PENNSYLVANIA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: DR PRO PRODUCTS, INC.
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," or "Certificate of Good Standing" 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:

Douglas R. Ritter
Name of Person
DR PRO PRODUCTS, INC.
Firm/Company
3200 Woodberry LN
Address
Sarasota, FL 34231
City/State and Zip code
r.ritter@ghosthaze.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas R. Ritter at (717) 397-4345
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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

**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. DR PRO PRODUCTS, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

DR PRODUCTS, INC. / PENNSYLVANIA
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Pennsylvania 3. 57-1167345
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. FEBRUARY 27, 2003 5. "Perpetual"
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 1/1/2015
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3200 woodberry LN SARASOTA 34231
(Principal office address)

3200 woodberry LN SARASOTA 34231
(Current mailing address)

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

Name: Douglas R. R. Her

Office Address: 3200 woodberry LN

SARASOTA, Florida 34231
(City) (Zip code)

FILED
15 APR -9 AM 10:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

Douglas R. R. Her
(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.

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

A. DIRECTORS

Chairman: Douglas R. Ritter
Address: 3200 Woodberry LN Sarasota, FL 34231

Vice Chairman: Carol D. Ritter
Address: 3200 Woodberry LN Sarasota, FL 34231

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Douglas R. Ritter
Address: 3200 Woodberry LN Sarasota, FL 34231

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: Carol D. Ritter

Address: 3200 Woodberry LN Sarasota, FL 34231

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

12. Douglas R. Ritter
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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. Douglas R. Ritter, Chairman
(Typed or printed name and capacity of person signing application)

FILED
15 APR -9 AM 10:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

DECEMBER 4, 2014

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

DR PRO PRODUCTS, INC.

is duly incorporated as a Pennsylvania Corporation under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.

FILED
15 APR -9 AM 10:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

A handwritten signature in cursive script, appearing to read "Carol Aichele".

Secretary of the Commonwealth