#### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number :

: (850)61.7~6383

From:

Account Name : CJP CONSULTINGFL

Account Number : I20160000015 Phone : (954)391-1214

Fax Number : (772)202-4331

\*\*Enter the email address for this business entity to be used for tutting annual report mailings. Enter only one small address please \*\* on F

Email Address: CJP Consulting FL @ gmail com

## FOREIGN PROFIT/NONPROFIT CORPORATION DWR, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
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Electronic Filing Menu

Corporate Filing Menu

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#### **COVER LETTER**

TO:	Registration Sec Division of Corp				
SUBJ	ECT: <u>DWR</u>				
		Name of corpora	ion - m	ust include suffix	
Dear S	ir or Madam:				
"Certif	ficate of Existence	on by Foreign Corporation  a," or "Certificate of Good in corporation to transact but	Standing	y" and check are subt	
Please	return all corresp	ondence concerning this ma	itter to t	he following:	
_Carc	l Pasquarpsa				
	• •	Name	of Pers	on	
_CJP	ConsultingFL				
		Firm/C	Compan	у	
1104	Waterway Drive				
_1_10-4	vaterway Onve		ddress		
0-1	# EL 80076				
<u>Sebas</u>	tian FL 32976	City/Sta	te and Z	ip code	- ATA
		·			•
cjpcor	rentingfi@gmail.d	E-mail address: (to be us	ed for f	uture annual report n	otification)
For fu	rther information	concerning this matter, plea	se call:		
ΔΙ	D				
Carol	Pasquarosa Name of Person		) _ Code	391-1214 Daytime Teleph	one Number
	. ,			-,	
	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations
Enclos	sed is a check for	the following amount:			
<b>S</b> \$70	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		8.75 Filing Fee & entified 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.

DWR INC. FL					
(If name unavail	able in Florida, enter alternate corporate name ac	lopted for the purpose of transactin	g business in	Florida	1)
California	3. 🛬	1 46-2709	1118		
(State or countr	y under the law of which it is incorporated)	(FEI number, if ap			
0010010010	_	•	•		
. <u>03/26/2013</u>	of incorporation) 5. "	(Date of duration, if other	sl	1\	
(Date	or incorporation)	(Date of duration, it other	man perpetu	ai)	
	(Date first transacted business in				
	(SEE SECTIONS 607.1501 & 607.150	12, F.S., to determine penalty habiti	ly)		
127 Rock Poir	t Drive, Vonore TN 37885				
	(Principa	l office address)	<u></u> .	C)	
			;+		
	(Current mailing	address, if different)	17.	20	
				(J)	** **
. Name and stree	st address of Florida registered agent: (P.O.	Box NOT acceptable)		301	
. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	737 c	<b>華</b>	me
. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O.	Box NOT acceptable)	Chr. Chr. Chr.	က်	Tell & A
Name:	Carol Pasquarosa	Box NOT acceptable)			ent & a v
Name:	<b>.</b>	Box <u>NOT</u> acceptable)		က်	THIS A.
Name:	Carol Pasquarosa 1104 Waterway Drive			က်	**************************************
Name:	Carol Pasquarosa 1104 Waterway Drive	Box NOT acceptable) , Florida	CHANGE CONTRACTOR	က်	Total Back
Name: ffice Address:	Carol Pasquarosa  1104 Waterway Drive  Sebastian  (City)	, Florida <u>32976</u>	CHANGE CONTRACTOR	က်	1.7964
Name:  ffice Address:  Registered ag	Carol Pasquarosa  1104 Waterway Drive  Sebastian (City) ent's acceptance:	, Florida <u>32976</u> (Zip code)		9: 02	mer
Name:  ffice Address:  Registered againg been name	Carol Pasquarosa  1104 Waterway Drive  Sebastian (City)  ent's acceptance: ed as registered agent and to accept service	, Florida <u>32976</u> (Zip code) e of process for the above state	d corporati	9:02	he pla
Name:  ffice Address:  Registered aglaving been namesignated in this	Carol Pasquarosa  1104 Waterway Drive  Sebastian (City)  ent's acceptance: ed as registered agent and to accept servic application, I hereby accept the appointm	, Florida <u>32976</u> (Zip code) e of process for the above state ent as registered agent and agr	ee to act in	9.02	<i>pacit</i>
Name:  Office Address:  Registered aglaving been namesignated in this arther agree to c	Carol Pasquarosa  1104 Waterway Drive  Sebastian (City)  ent's acceptance: ed as registered agent and to accept service	, Florida <u>32976</u> (Zip code) e of process for the above state ent as registered agent and agr lative to the proper and comple	ee to act in te perform	9.02	<i>pacit</i>
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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 Timothy C Roberts	77.00		ope the State of
Address: 127 Rock Point Dr			
Vonore, TN 37885		,	
		,	
Monore, TN 37885	And the second s	,	سبيا كالموج
		114000000000000000000000000000000000000	
Director: Kristen B Roberts			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Address: 127 Rock Point DY	ARRESTALL A SEATHOUGH FOR SPIRITURE AND ARRESTALL AND ARRESTALLS.		<b>~</b>
Vanore, TN 37885	<del></del>		
Director:	**************************************		<del></del>
Address		<del></del>	
B. OFFICERS		כבו	1 m
President: Douglas W. Roberts	Halifi Lagar Hari	UT	
Address: 127 Rock Point Drive		ب <u>ت</u> بيد	f ""
Vonora, IN 37885	7	Ö	ě
Vice President		by 659	
Address:			
	de Walter and and any other security of the second discount of the s	,,,,, <del></del> ,	<del></del>
Secretary: Kristen Raberts	AND COMPANY OF THE PROPERTY OF		<del></del>
	7700	<u> </u>	
1	<u> </u>		
Treasister	ىنىڭى <u>نىڭ ياڭ كار</u> ۇ دارە جىيىسىدە ئىسى سىسىنىلىقىرىت		Parties et a - 1-5 for 1995.
Address;			<del></del>
NOTE: In necessary for may attach an addendate to the application listing additional officers	and/or directo	es.	
Signature of Director or Officer	^p	alarang si makayanan	<del></del>
The office or director significathis document (and who is listed in number 11 above) affirms the	n the facts star	ed hen	sin
are true and that he or she is aware that talse information submitted in a document to the Dopart a third dogree felony as provided for in 8.817.155, F.S.	iment of State	constitu	ntea
13. Douglas W. Roberts			
(Typed or printed name and capacity of person signing application)		aming general property of a second	

CALL THURSDAY WE CAN

# State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

DWR, INC.

FILE NUMBER: FORMATION DATE: C3556538 03/26/2013

FORMATION DATE: TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 22, 2016.

ALEX PADILLA Secretary of State

NP-25 (REV 01/2015)

NSS