

F17000004285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

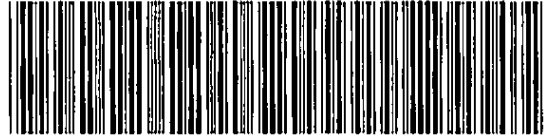
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800303575888

09/25/17--01021--014 **70.00

FILED

17 SEP 25 PM 2:55

DIVISION OF CORPORATIONS

O. GIMMONS
SEP 26 2017

COVER LETTER

TO: Registration Section
Division of Corporations
DIVERSE DEVELOPMENT GROUP, INC.

SUBJECT: _____
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:
STEVEN SOUTHWELL

Name of Person
J. STEVEN SOUTHWELL, PA

Firm/Company
P.O. BOX 1748

Address
WAUCHULA, FLORIDA 33873

City/State and Zip code
SSOUTHWELL@REALFLORIDALAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVEN SOUTHWELL 863 773-4449

Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

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

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

**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.*

DIVERSE DEVELOPMENT GROUP INC.

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

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

DELAWARE

81-2338251

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
APRIL 4, 2016

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

4819 WOOD POINTE WAY, SARASOTA, FLORIDA 34233

7. _____
(Principal office address)

(Current mailing address, if different)

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

STEVEN SOUTHWELL

Name: _____

502 W. MAIN STREET

Office Address: _____

WAUCHULA

33873

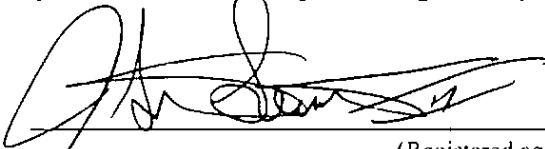
_____, Florida _____

(City)

(Zip code)

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.



(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.

FILED
17 SEP 25 PM 2:55
DIVISION OF

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

A. DIRECTORS

CHRISTOPHER KIRITSIS

Chairman:

4819 WOOD POINTE WAY

Address:

SARASOTA, FLORIDA 34233

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

CHRISTOPHER KIRITSIS

President:

4819 WOOD POINTE WAY

Address:

SARASOTA, FLORIDA 34233

Vice President:

Address:

CHRISTOPHER KIRITSIS

Secretary:

4819 WOOD POINTE WAY, SARASOTA, FLORIDA 34233

Address:

Treasurer:

Address:

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

12.

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

President, CEO and Treasurer

13.

Christopher Kiritsis

(Typed or printed name and capacity of person signing application)

FILED
17 SEP 25 PM 2:55
DIVISION OF CORPORATE REGISTRATION

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DIVERSE DEVELOPMENT GROUP INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DIVERSE DEVELOPMENT GROUP INC." WAS INCORPORATED ON THE FOURTH DAY OF APRIL, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



6008213 8300

SR# 20176272453

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203266924

Date: 09-21-17