F17000005228

(Re	equestor's Name)	
(Ad	(dress)	
(Ac	ldress)	_
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	,
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	3317
		_ <u>_</u>

Office Use Only



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S. WARREN HOV 2 0 2017



October 18, 2017

DAVID J MARSHALL 5943 LONG COVE DRIVE JACKSONVILLE, FL 32222

SUBJECT: DM DESIGN CO., INC. Ref. Number: W17000083317

We have received your document for DM DESIGN CO., 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 document number of the name conflict is L07000004380 D M DESIGNS, LLC.

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) 245-6051.

Letter Number: 617A00021088

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:		tration Se on of Cor	ction porations				
SUBJE			gn Co., Inc				
3000	201.		Name	of corpora	ition - m	ust include suffix	
Dear Si	r or M	adam:					
"Certifi	cate of	Existenc		e of Good	Standin	g" and check are sul	ect Business in Florida," omitted to register the
Please r David J.		•	ondence concern	ing this m	atter to	the following:	
				Name	of Pers	ion	
DM Des	sign Co	., Inc.					
	_			Firm/	Compan	У	
5943 Lo	ong Cov	re Drive	<u> </u>				
Jackson	ville, F	L 32222		Λ	ddress		
				City/Sta	ite and 2	Lip code	
davidma	arshalld	iesign@ho ————					
			E-mail addres	s: (to be u	sed for f	uture annual report	notification)
For furt	her inf	ormation	concerning this n	natter, plea	ase call:		
David J.	. Marsh	ail		508		776-7745	
	Name	of Perso		at (Daytime Telep	hone Number
	Regist Divisi Clifto 2661 I	tration Se on of Cor n Buildin	porations g Center Circle	SS:		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	section orporations 7
Enclose	d is a	check for	the following am	ount:			
\$ 70.	00 Fili	ng Fee	S78.75 Filin Certificate			78.75 Filing Fee & ertified 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.

Taun	orp." "Inc." "Co." or "Corp.") MARSHALL DESIGN	I INC.	
(If name unavail: Massachusetts	able in Florida, enter alternate corporate name a	adopted for the purpose of transacting business in Florida) 04-3583023	
	3.		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
11/13/2001	5		
/Date	of incorporation) 5.	(Date of duration, if other than perpetual)	
09/01/2017	or messipseumon)	(come or marining is only strain perpendic)	
	(Date first transacted business in		
	(Princip	pal office address)	
Same			
	(Current mailin	ng address, if different)	
		<i>☆</i> ~ エ ・	
Name and stree	it address of Florida revistered agent: TP C) Box NOT acceptable)	רַז־
Name and stree	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	
Name and stree	et address of Florida registered agent: (P.C David J. Marshall	SS3-70	FILE
	David J. Marshall		FILED
Name:		— —	FILED
_ 	David J. Marshall 5943 Long Cove Drive Jacksonville		FILED

9. Registered agent's acceptance:

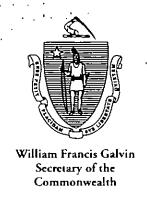
Having been named as registered agent and to accept service of process for the above stated corporation at the piace designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS David J. Marshall Chairman: 5943 Long Cove Drive Address: _ Jacksonville, FL 32222 Vice Chairman: Address: ____ Director: Director: ___ Address: ___ **B. OFFICERS** David J. Marshall President: 5943 Long Cove Drive Address: Jacksonville, FL 32222 Same Vice President: Same Secretary: Treasurer: Address: _____ NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. 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 (alse 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. David J. Marshall, President



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

September 5, 2017

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

DM DESIGN CO., INC.

is a domestic corporation organized on **November 15**, **2001**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travino Galicin

Processed By: sam