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Florida Department of State
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : ALLSTATE CORPORATE SERVICES CORP
Account Number : 120040000031
Phone : (800) 906-9220
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION
DYMENG SERVICES, INC.

Certificate of Status	1
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AUG 10 2018

**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. **DYMENG SERVICES, INC.**

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

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

2. **NEW YORK**

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

3. _____

(FEI number, if applicable)

4. **JUNE 10, 2016**

(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. **156 ALEGRIA CIRCLE, ST. AUGUSTINE, FLORIDA 32095**

(Principal office address)

156 ALEGRIA CIRCLE, ST. AUGUSTINE, FLORIDA 32095

(Current mailing address)

8. **SOFTWARE SALES & ANY LAWFUL PURPOSES IN FURTHERANCE THEREOF.**

(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:

VALERIE GRACE D. LEACH

Office Address:

156 ALEGRIA CIRCLE

ST. AUGUSTINE

(City)

Florida **32095**

(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: VALERIE GRACE D. LEACH

Address: 156 ALEGRIA CIRCLE
ST. AUGUSTINE, FL 32095

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: VALERIE GRACE D. LEACH

Address: 156 ALEGRIA CIRCLE

ST. AUGUSTINE, FL 32095

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____


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.

14. VALERIE GRACE D. LEACH, PRESIDENT

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

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of DYMENG SERVICES, INC. was filed on 06/10/2016, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

I further certify that no other documents have been filed by such corporation.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 07th day of August
two thousand and eighteen.*

Brendan W. Fitzgerald
Executive Deputy Secretary of State