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## **COVER LETTER**

TO:		tration Section of Corpora					
SUBJ	FCT.	Dive Guy Sale	es Group Inc.				
500	ECT.		Name of corp	oration - m	ust include suffix		
Dear S	ir or M	adam:					
"Certif	ficate of	f Existence," o	by Foreign Corporation "Certificate of Goo reporation to transact	d Standing	" and check are subr		
Please	return	ali correspond	ence concerning this	matter to the	ne following:		
David	Hall						
			Na	me of Pers	on		
		·	Die	m/Compan	· · · · · · · · · · · · · · · · · · ·	-	
246 W	ekiva Po	oint Cir.	FH	писотран	y		
		· · · · · · · · · · · · · · · · · · ·	···	Address			
Apopk	a, FL 32	2712					
			City/	State and Z	ip code		
Davel	lallusa@	icloud.com					
-		1	E-mail address: (to be	used for fi	iture annual report n	otification)	
For fu	rther in	formation con	cerning this matter, p	olease call:			202
Michael Byers			2	458-8864 (2)			
	Nam	e of Person			Daytime Telepl	hone Number	- J
							₹ <u>;</u>
STREET/COURIER ADDRESS:				MAILING ADDRESS:			
Registration Section				Registration Section			
Division of Corporations The Centre of Tallahassee				Division of Corporations P.O. Box 6327			
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				Tallahassee, FL 32314			
			following amount:		CT ATE		
			: FLORIDA DEPART  i \$78.75 Filing Fee		STATE 8.75 Filing Fee &	□ \$87.50 Filir	na Fee
<u> </u>	J.UU FII	mg ree	Certificate of State		ertified Copy	Certificate Certified C	of Status &

# 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.

Texas		75 2076651	Florida)
	3.	75-2936654 (FEI number, if applicable)	_
•	nder the law of which it is incorporated)	(r & number, if applicable)	
04-17-2001	incorporation) 5.	(Date of duration, if other than perpetua	-
(Date of	incorporation)	(Date of duration, if other than perpetua	11)
246 Wekiva Point C	(SEE SECTIONS 607.1501 & 607.1. ir., Apopka, FL 32712	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
same	(Principal off	ice <u>street</u> address)	
	(Current mailit	ng address, if different)	
Name and street a	address of Florida registered agent: (P.C	O. Box NOT acceptable)	2020 SF
Name:	David Hall	<u></u>	9-1
ffice Address:	246 Wekiva Point Cir.		
•	Apopka	 . Florida <sup>32712</sup>	Æ: 8:
•	(City)	, Florida 32712 (Zip code)	 ∧>

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
Chairman	Name:	□ Chairman	Name:				
□Vice Chairman	Address: 246 Wekiva Point Cir.	□Vice Chairman	Address: 246	Wekiva Point Cir.			
Director	Apopka, FL 32712	Director	Apopka, FL	32712			
President		□President					
□Vice President		■Vice President					
☐ Secretary	□Treasurer	☐ Secretary		☐Treasurer			
Other	Other	□Other	<del></del>	□ Other			
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:	<del></del>			
□Director		□Director	<del></del> -				
□President		□President					
□Vice President		□Vice President					
☐ Secretary	Treasurer	☐ Secretary		□Treasurer			
□Other	Other	□Other	<del></del>	□ Other			
				20			
□ Chairman	Name:	□Chairman	Name:	2020			
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director		• ————————————————————————————————————			
President		□President	<del></del>	=: 8			
□Vice President		□Vice President		£2			
□ S <b>c</b> cretary	□Treasurer	☐ Secretary		□Treasurer			
□Other	Other	Other	<del></del>	Other			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  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.  David Hall, President							
(Typed or printed name and capacity of person signing application)							

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



### Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for DIVE GUY SALES GROUP INC. (file number 162538100), a Domestic For-Profit Corporation, was filed in this office on April 17, 2001.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 20, 2020.



Ruth R. Hughs

Secretary of State

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 Phone: (512) 463-5555
 Fax: (512) 463-5709
 Dial: 7-1-1 for Relay Services

 Prepared by: SOS-WEB
 TID: 10264
 Document: 991317020002