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	(Requestor's Name)			
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	(Business Entity Name)			
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3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date: _____03/12/2021

D	ate:	03/12	2/2021	anic SW
		Acc	#120160000072	4: C) - W
Name:	DFP Impe	ex, Inc (U	JSA)	
Document #:				_
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		((1	Thank you!	

COVER LETTER

_	stration Section ion of Corpora DFP Impex, In	tions					
SUBJECT:	——		tion	must include suffice			
		Name of corp	oration -	must include suffix			
Dear Sir or M	ladam:						
"Certificate o	f Existence," c		od Stand	Authorization to Transact I ling" and check are submi s in Florida.			
Please return Rob Tunheim	all correspond	ence concerning thi	s matter i	to the following:			
		N	ame of P	erson			
Fafinski Mark	& Johnson P.A					•	2
		Fi	rm/Comp	any			WZI MAK
775 Prairie Ce	enter Drive, Suit	2 400				7.5	2
			Addres	s		-1-1	2
Eden Prairie, MN 55344							$\stackrel{\sim}{=}$
e.adamson@io	cloud.com	City	/State and	d Zip code		712	90 :8
	17	-mail address: (to b	e used fo	or future annual report not	ification)		
For further in	formation con-	cerning this matter,	please ca	dl:			
Rob Tunheim		9; at (52	995-9500			
Nam	e of Person		rea Code	Daytime Telephor	ne Number	-	
Regis Divis Clifto 2661	EET/COURIF stration Section alon of Corpora on Building Executive Cer hassee, FL 32	tions iter Circle		MAILING ADT Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	tion orations		
Enclosed is a	check for the	ollowing amount:		/			
₹ \$70.00 Fil	ling Fee -	\$78.75 Filing Fee Certificate of Stat		\$78.75 Fiting Fee & Certified Copy	\$87.50 Filin Certificate	of Status	Ŀ

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.

DFP Impex, Inc			
(Enter name of co	orporation; must include "INCORPORATED," "(COMPANY," "CORPORATION,"	
me., co., co.	mp. Met. Co. or Co.p. y		
(If name unavaila	ble in Florida, enter alternate corporate name ado	pted for the purpose of transacting business it	ı Florida)
Delaware	3		
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)	
2/25/2021			
· Date	of incorporation) 5	(Date of duration, if other than perpetu	nal)
1/29/2020		· ·	
1.	(Date first transacted business in FI	orida if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502	F.S., to determine penalty liability)	
20711 Holt Ave,			
·	(Principal)	office address)	
Lakeville, MN 5	5044		
	(Current mailing a	ddress, if different)	· ·
Name and stree	a address of Florida registered agent: (P.O. I	Box NOT acceptable)	
. Trans ind street	C T Corporation System	<u></u>	, 1 cm
Name:			
Office Address:	1200 South Pine Island Road		A The feet of the
strice readiess.	Plantation.		or o
		, 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.

By: Stephanie Hencz Assistant Secretary

(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 Chairman: Address: Vice Chairman: Address: ___ Director: Address: Director: B. OFFICERS Eric D. Adamson President: 20711 Holt Ave, #1525 Address: Lakeville, MN 55044 Vice President: Address: John Kemp Secretary: 20711 Holt Ave. #1525, Lakeville, MN 55044 Address: Manish Dashputre Treasurer: 20711 Holt Are. #1525, Lakeville, MN 55044 Address: _ an adderdum to the application listing additional officers and/or directors. NOTE: If necessary, you may attack Myon 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. Eric D. Adamson 13.

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

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DFP IMPEX, INC. (USA)" 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 ELEVENTH DAY OF MARCH, A.D. 2021.

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

Authentication: 202707606

Date: 03-11-21