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(Re	equestor's Name)	
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	C	OVER LETT	ER		
TO: Regis	stration Section				
	ion of Corporations				
SUBJECT:	DKP ADMINISTRATION, IN	C			
SCHOLET.	Name of	f corporation - mus	st include suffix		
Dear Sir or M	ladam:				
The enclosed "Certificate or	"Application by Foreign Corp f Existence," or "Certificate of	poration for Author of Good Standing"	rization to Transact Busine and check are submitted to	ss in Elorida register the	77
above referen	ced foreign corporation to tra	nsact business in F	florida.	LAPR PALLE	
	all correspondence concerning	g this matter to the	e following:	7 -5 7 -5	
MICHAEL RC	BERT FREE			11.	į~
	<u> </u>	Name of Person	1		
DKP ADMINI	STRATION, INC			9. N.	
''	··· • • • • • • • • • • • • • • • • • •	Firm/Company			
4925 BOONSE	BORO ROAD SUITE 238	, -			
		Address			
LYNCHBURG	G, VA 24503				
		City/State and Zip	code	 	
INFO@DKPA		21.5/ Quint und 21.p			
		(to be used for futi	re annual report notification	<u></u>	
For further inf	formation concerning this made			,	
MICHAEL FR	EE a	t (⁸³³) ³⁵	7-2366		
Name	e of Person	Area Code	Daytime Telephone Nun	nber	
STRE	EET/COURIER ADDRESS:	:	MAILING ADDRESS	S:	
Regist	tration Section		Registration Section		
	ion of Corporations		Division of Corporation	าร	
	Centre of Tallahassee		P.O. Box 6327		
	N. Monroe Street, Suite 810 nassee, FL 32303		Tallahassee, FL 32314		
	check for the following amou		ГАТБ		
	THE PROPERTY OF EACH PROPERTY DES	CARADILLOT OF 3.	IAIL		

☐ \$78.75 Filing Fee &

■ \$87.50 Filing Fee,

 \square \$70.00 Filing Fee \square \$78.75 Filing Fee &

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.

	lable in Florida, enter alternate corporate nam		purpose of transacting b	usiness in F	lorida
VIRGINIA		3 83-1719993			
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)			
05/ (6 /2018	5	i₋		. •	~>
-	e of incorporation)	(Date of duration, if other than per		perpetual)	3
N/A					Po
019 VISTA PA	(Date first transacted business (SEE SECTIONS 607.1501 & 607. RK DRIVE, SUITE A. FOREST, VA 24551 (Principal of		rmine penalty liability)	NA OF S	-5 PM 3:
925 BOONSBO	ORO ROAD, SUITE 238. LYNCHBURG, VA		•		28
	(Current mail	ing address, if diff	erent)		
Name and <u>stre</u> Name:	et address of Florida registered agent: (P. REGISTERED AGENT SOLUTIONS, IN		cceptable)		
ice Address:	155 OFFICE PLAZA DRIVE, SUITE A				
	TALLAHASSEE	, Florida	32301		
	(City)	, , i loi lua _	<u>-</u> -		

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.

Mackenzie Hart, Asst. 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.

A. DIRECTORS					
□Chairman	Name:	Chairman	Name:		
□Vice Chairman	Address: 215 OVERSTREET LANE	□Vice Chairman	Address:		
□Director	LYNCHBURG, VA 24503	□Director			
President		□President			
□Vice President		□Vice President			
Secretary	Treasurer	☐ Secretary		□Treasurer	
□Other		Other	_	□Other	
□ Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address: 7612 TIMBERLAKE RD #1043	□Vice Chairman	Address:	2021 SET	
□Director	LYNCHBURG, VA 24502	□Director	Address:		
□President		President		100 July 100	
■ Vice President		□Vice President		Harris III	
□Secretary	Treasurer	☐ Secretary		□ Treasurer_o	
□Other	Other	Other		□Other	
□ Chairman	Name: CHARMIN THOMAS	□Chairman	Name:		
□ Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	FOREST, VA 24551	□Director	•		
□President		□President			
□ Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer	
■Other	Other	□Other		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.

Commonboealth of Hürginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That DKP ADMINISTRATION, INC. is duly incorporated under the law Commonwealth of Virginia;

That the corporation was incorporated on May 16, 2018;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

March 18, 2021

Bernard J. Logan, Clerk of the Commission

CERTIFICATE NUMBER : 2021031815637925