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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number

: (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	LΑC	nbt	es	S	:

### FOREIGN PROFIT/NONPROFIT CORPORATION

### **DJW Valuation Services Inc**

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# 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.

If name unavai	lable in Florida, enter alternate corp	norste name ador	and for the manage of transporting	· Acceleration for ESA - Land
Toyac				
(State or count	ry under the law of which it is inco	3	(1212)	Part 1
7/1/202				
(Date	c of incorporation)	5	(Date of duration, if other th	
(12 -12)	,		(trate of diffation, if other ti	ian perpetuati
	(Date first transacte	d husiness in Flo	rida, if prior to registration)	
	(SEE SECTIONS 607.15	50 L& 607.1502, I	F.S., to determine penalty liabilit	y)
<sup>7</sup> 901 4th	St N STE 300 St.	Petersbi	urg FL 33702	
	(P	rincipal office st	reet address)	<del></del>
7901 4th	St N STE 300 St.	Petersbu	ira EL 33702	
			119 1 L 00/02	
Name and street		urrent mailing ad	dress, if different)	
Name:	Registered Age	agent: (P.O. Bo	dress, if different)  ox <u>NOT</u> acceptable)	2022
Name:	Registered Age	agent: (P.O. Bo	dress, if different)  ox <u>NOT</u> acceptable)	2022 JUL SELRE
Name:	Registered Age	agent: (P.O. Bo	dress, if different)  ox <u>NOT</u> acceptable)	SEURE MASS
Name: ñce Address:	Registered Age 7901 4th St N S St. Petersburg (City)	agent: (P.O. Bo	dress, if different)  ox <u>NOT</u> acceptable)	SELRE MASSE
Name: fice Address:  Registered agoving been namesignated in this orthogonal control of the cont	Registered Age	agent: (P.O. Bo ents Inc. STE 300  ccept service of the appointment	ox NOT acceptable)  Florida 33702  (Zip code)  process for the above stated as registered agent and agrees to the groups and consolved.	to not in this sand
Name: ice Address: Registered ago ving been nam ignated in this her agree to c	Registered Age 7901 4th St N S St. Petersburg (City)  ent's acceptance: ed as registered agent and to accept the comply with the provisions of all	agent: (P.O. Bo ents Inc. STE 300  ccept service of the appointment	ox NOT acceptable)  Florida 33702  (Zip code)  process for the above stated as registered agent and agrees to the groups and consolved.	to act in this capac performance of my

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: David Wolff	□Chuirman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
⊠Director	14975 Fannin Road	Director			
<b>™</b> President	Willis TX 77378	□President			
□Vice President		□Vice President			
<b>X</b> iSecretary	XI Treasurer	□ Secretary	Treasure:		
□Other	CiOther	Other	□Other		
□Chairman	Name:	□Chairman	Name:		
∐Vice Chairman	Address:	□Vice Chairman	Address:		
Director		□Director			
□President		□President			
□Vice President		□Vice President			
□ Secretary	□ Treasurer	□ Secretary	☐ Treasurer		
□Other	Other	Other	□Other		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address	□Vice Chairman	Address:		
□ Director		□ Director			
□President		□President			
□ Vice President		□Vice President			
☐ Secretary	□Treasurer	ElSecretary	□Treasurer		
□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. Department of State Annual Report form.					
Signature of Director or Officer					
The officer or director signing this document (and who is listed in number 11 above) affirms that the facis 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 Wolff (Director/President/Secretary/Treasurer)
(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, Certificate of Formation for DJW Valuation Services Inc (file number 804631698), a Domestic For-Profit Corporation, was filed in this office on July 01, 2022.

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 July 06, 2022.



John B. Scott Secretary of State

-ax: (512) 465-5705 TID: 10264

Phone: (512) 463-5555 Prepared by: SOS-WEB Dial: 7-1-1 for Relay Services Document: 1160522580003