F23000005188

(Requestor's Name)
(Address)
(100.000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ming officer.
W230000 616 B

Office Use Only



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2023 SEP 12 AH 10: 35



April 28, 2023

JOHN C HUBBARD 17944 SE 125TH CIRCLE SUMMERFIELD, FL 34491 US

SUBJECT: PDM GROUP INC Ref. Number: W23000061608

We have received your document for PDM GROUP INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company." "L.C.." and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Andrea Andrews Regulatory Specialist II

Right NB

Letter Number: 423A00009522

COVER LETTER

	stration Section sion of Corporation	as				
SUBJECT:	PDM GROUP. IN	c.				
JODGEC 1.	****	Name of corporat	ion - mus	t include suffix		
Dear Sir or N	/ladam:					
"Certificate of	of Existence," or "C		tanding":	and check are sub	ct Business in Florida," omitted to register the	
Please return	all correspondence	concerning this ma	tter to the	following:		
JOHN C HUE	BBARD					
-		Name	of Person			
PDM GROUP	P. INC.					
		Firm/C	ompany		<u> </u>	
17944 SE 125	TH CIR					
		Ac	idress			
SUMMERFIE	ELD, FL 34491-8082					
		City/Stat	e and Zip	code		
JCHUBBARI.	@GMAIL.COM					
	E-ma	il address: (to be use	ed for futu	re annual report i	notification)	
For further in	iformation concern	ing this matter, pleas	se call:			
JOHN C HUBBARD 803			984-7508			
Nam	ne of Person	Area C	Code	Daytime Telep	hone Number	
STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		s ee		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	check for the follo	wing amount: DRIDA DEPARTME	NT OF ST	ATE		
■ \$70.00 Fil	ing Fee	8.75 Filing Fee & ertificate of Status	□ \$ 78.7	'5 Filing Fee & fied Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

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.

"Inc.," "Co.," "C	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	COMPANT, CONFORMATION,			
JCH CONDO R					
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transacting l	business in Fl	lorida)	
SC	3. 20-2277297				
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)			
1/26/2005	5				
(Date of incorporation)		(Date of duration, if other than perpetual)			
9/7/2022					
17944 SE 125TH	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 CIR, SUMMERFIELD FL 34491-8082	, F.S., to determine penalty liability))		
17944 SE 125TH	(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liability))		
	(SEE SECTIONS 607.1501 & 607.1502 CIR, SUMMERFIELD FL 34491-8082 (Principal office	, F.S., to determine penalty liability)			
-	(SEE SECTIONS 607.1501 & 607.1502 CIR, SUMMERFIELD FL 34491-8082 (Principal office (Current mailing a set address of Florida registered agent: (P.O. I	street address) ddress, if different)	: :	2023 S	
-	(SEE SECTIONS 607.1501 & 607.1502 CIR, SUMMERFIELD FL 34491-8082 (Principal office (Current mailing a	street address) ddress, if different)		2023 SEP	
Name and stree	(SEE SECTIONS 607.1501 & 607.1502 CIR, SUMMERFIELD FL 34491-8082 (Principal office (Current mailing a set address of Florida registered agent: (P.O. I	street address) ddress, if different)	1	SEP 12	
Name and street	(SEE SECTIONS 607.1501 & 607.1502 CIR, SUMMERFIELD FL 34491-8082 (Principal office (Current mailing a set address of Florida registered agent: (P.O. I JOHN C HUBBARD 17944 SE 125TH CIR	street address) ddress, if different)		2023 SEP 12 AM 10: 3	

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.

(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: JOHN C HUBBARD	□Chairman	Name:				
□Vice Chairman	Address: 17944 SE LASAN CIR	□Vice Chairman	Address:				
Director	SUMMERFIELD FL 34491	□Dircctor					
D'President		□President					
□Vice President		□Vice President	 				
Secretary	Treasurer	Secretary		Treasurer			
□Other	Other	Other		Other			
Chairman	Namc:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director		Director					
□President		President					
□Vice President		□Vice President					
Sccretary	☐Treasurer	Secretary		□Treasurer			
□Other		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			
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.							
13	JOHN C HUBBARD (Typed or printed name and capacity of perso	n signing application	ENT				
	7-34 F.						

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

PDM GROUP, INC., a corporation duly organized under the laws of the State of South Carolina on January 26th, 2005, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 7th day of March, 2023.

Mark Hammond, Secretary of State