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S. ROBERTS

NOV 1 7 2023

COVER LETTER

	FO: Registration Section Division of Corporations					
SUBJECT:	D & A Land, Inc.					
Name of corporation - must include suffix						
Dear Sir or M	adam:					
"Certificate of	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to tr	of Good Standi	ng" and check are submit			
Please return	all correspondence concerni	ng this matter to	the following:			
Judy Pinette		_				
		Name of Pe	erson			
Moore, Hill &	Westmoreland, P.A.	<u> </u>		<u> </u>		
		Firm/Comp	any			
P.O. Box 1329	0					
		Addres	S			
Pensacola, FL	32591-3290					
		City/State and	l Zip code			
jpinette@mhw		<i>(.</i> 1 1 <i>()</i>		P*		
	E-mail address	: (to be used for	r future annual report noti	rication)		
For further in	formation concerning this m	atter, please cal	1:			
Judy Pinette		at (850) 434-3541			
Name	e of Person	Area Code	Daytime Telephon	e Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sect Division of Corpo P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314			
	check for the following amo eck payable to: FLORIDA DE ing Fee	EPARTMENT C		☐ \$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.

1. D&A Land of	Plorida, Inc. D&A Land I	n C	
(Enter name of c	orporation; must include "INCORPORATED," orp," "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail	Land OF Florida able in Florida, enter alternate corporate name a	Inc.	usiness in Florida)
(State or countr	y under the law of which it is incorporated) 3.	(FEI number, if applic	rable)
4. May 18, 2020			
(Date	of incorporation)	(Date of duration, if other than perpetual)	
ó			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 02, F.S., to determine penalty liability)	
7. 7113 Wynnfeild	Drive S., Mobile, Alabama 36695		
	(Principal offic	e <u>street</u> address)	
	(Current mailing	address, if different)	
8 Name and stree	et address of Florida registered agent: (P.O.	Day MOT againstable)	
		box <u>NOT</u> acceptante)	262
Name:	Jessica L. Scholl	-	2673 [] 7
Office Address:	350 W. Cedar Street, Suite 100	<u>-</u>	-
	Pensacola	. Florida 32502	
	(City)	(Zip code)	∑: ≥: ₩
9. Registered ago	ent's accentance		.
Having been nam	ed as registered agent and to accept servic	e of process for the above stated co	rporation at the place
designated in this	application, I hereby accept the appointm	ent as registered agent and agree to	o act in this canacity. I
and I am familiar	omply with the provisions of all statutes re with and accept the obligations of my pos	lative to the proper and complete p ition as registered agent.	erformance of my duties
		a ass	
_			_
	(Registered agent's sig		
10. Attached is a the Department of	certificate of existence duly authenticated, r State, by the Scoretary of State or other off	not more than 90 days prior to delive icial having custody of corporate re	ery of this application to cords in the jurisdiction

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

under the law of which it is incorporated.

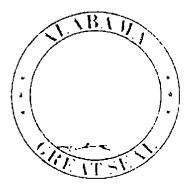
A. DIRECTORS Karam Muzahem ☐ Chairman ☐ Chairman 7113 Wynnfield Drive S. Address: □Vice Chairman ☐ Vice Chairman Mobile, AL 36695 Director □ Director President □ President □Vice President ____ ☐ Vice President □ Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer ☐ Other ______ □Other _____ □Other . _____ □Other _____ ☐ Chairman Name: _____ □ Chairman Name: □Vice Chairman Address: _______ □Vice Chairman Address: _____ □ Director □Director □ President President □Vice President _____ ☐ Vice President □Treasurer Treasurer □ Secretary □ Secretary □Other _____ □Other _____ □Other _____ ☐ Other _____ □ Chairman Name: _____ Chairman Name: Address: □Vice Chairman Address: ______ ☐ Vice Chairman Director ☐ Director □ President ☐ President ☐ Vice President □Vice President _____ ☐ Treasurer ☐ Secretary Treasurer ☐ Secretary 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 ac-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. Karam Muzahem

Wes Allen Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Wes Allen, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that D & A. LAND INC was formed in Baldwin County on May 18, 2020. The Alabama Entity Identification number for this entity is 000-630-932. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20231117000020578

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

11/17/2023

Date

Wes Allen

Secretary of State