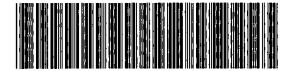
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Special Instructions to Filing Officer:			
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COVER LETTER

TO:	Registration Section
	Division of Cornorations

__ TD GROUP, LLC

SUBJECT:

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DIANNE E HARDENBERGH			
Name of Person		•	
TD GROUP LLC			
Firm/Company		•	
1125 N FLETCHER AVE	; , 1	21	
Address			an construction
FERNANDINA BEACH, FL 32034	2. 名言	2014 MAR 2	AND THE PARTY OF T
City/State and Zip Code	97	Ē.	3
TDG@DSNFL.COM		H-	,
E-mail address: (to be used for future annual report notification)	<u>194</u>	- 55	

For further information concerning this matter, please call:

DIANNE HARDENBERGH _{at} 904 6

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status □ \$155.00 Filing Fee & Certified Copy

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that I am the Authorized Person

of TD GROUP LLC	FO	70J4
of TD GROUP LLC (Name of Limited Liability Company)		MAR
a limited liability company duly organized and existing under the laws of	HASSE	R 24
(State Country of Organization)	179	E 5
Because the name of this foreign limited liability company does not satisfy	the Sin	J.
requirements of the s. 605.0112, F.S., the limited liability company hereby	adopts tl	he
following name to transact business in the state of Florida:		
Digital Solutions of America L.	L.C.	<u>_</u> .
(Name to be used by limited liability company in Florida. NOTE: Name must contain Limited Liab Company, L.L.C., or LLC.)	ility	
X Dianne Hardenbergh 3/2	1/20	<u>1</u> 4
Signature Authorized Person Date		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. TD GROUP LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.	," or "LLC.")
DIGITAL SOLUTIONS LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate	to name must include "Limited
(if name unavariable, enter afternate name adopted for the purpose of transacting business in Florida. The afternat Liability Company," "L.L.C," or "LLC.")	e name must include Linned
_{2.} WYOMING _{3.} 43-2119565	
(Jurisdiction under the law of which foreign limited liability (FEI number, if approximately company is organized)	plicable)
4. N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
₅ 1125 N FLETCHER AVE	
FERNANDINA BEACH, FL 32034	2014)
(Street Address of Principal Office)	
6. 1125 N FLETCHER AVE	<u> </u>
FERNANDINA BEACH, FL 32034	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to	
DIANNE E HARDENBERGH , OWNER	
1125 N FLETCHER AVE	
FERNANDINA BEACH, FL 32034	
8. Attached is an original certificate of existence, no more than 90 days old, duly auth having custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate un must be submitted) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of person am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as pro-	A photocopy is not der oath of the translator
Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name	of the	Limited	Liability	Company	is:
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TD GROUP LLC

If unavailable, the alternate to be used in the state of Florida is:

DIGITAL SOLUTIONS LLC

2. The name and the Florida street address of the registered agent and office are:

DIANNE HARDENBERGH	2014 M
(Name)	
1125 N FLETCHER AVE	SSECT AND SECTION OF THE SECTION OF
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
FERNANDINA BEACH FL 32034	55 S
City/State/Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

TD Group LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **January 10, 2014**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2014-000657042**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 5th day of March, 2014 at 5:57 PM. This certificate is assigned 015217421.



Max Massiels

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.