*11/4000004775

(кеф	uestors Namei	
	uestor's Name)	
		1
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone #	9)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name)
(Doc	ument Number)	
Certified Copies	Certificates o	f Status
Special instructions to F	iling Officer:	•

Office Use Only



500261467905

07/07/14--01006---018 **320.00

DEPARTMENT OF STATE

14 JUL -7 LM IN: 15

RETARÝ OF STAT AHASSEE, FLORI

FILED

2014 JUL -7 AM 8: 31

K.SALY EXAMINER JUL -8 2014

Requester's Name Address City/State/Zip Phone #	Programme of the Control of the Cont	
-	Taretan Prince	
		ce Use Only
CORPORATION NAME(S) & DOCUME	14 i. Moimprk(3), (11 kbo	₩ <u>₽</u>):
1. Delawa Kalai (Corporation Name)	Document #)	otile.
? (Corporation Name)	(Document #)	
,	, ,	
3. (Corporation Name)	(Document #)	
4. (Curporation Name)	(Document क्)	
	(Docament e)	- ∕
Walk in Pick up time		Certified Copy
Mail out Will wait	Photocopy D	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	
T Profit	Amendment	
Not for Profit	Resignation of R.A.	Officer/Director
Not for Profit Limited Liability Domestication Other	Change of Registered Dissolution/Withdray	
Other	☐ Merger	·· ·
OTHER FILINGS	REGISTRATION/OUA	LIFICATION
Annual Report	Foreign	
☐ Fictitious Name	Limited Partnership	
	☑ Reinstatement ☑ Trademark	
	Other	· · · · · · · · · · · · · · · · · · ·
		Examiner's Initials
CR2E031(7/97)		

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:

1. Deland Retail Investm		
(Name of Foreign Limited	Liability Company; must include "Limited Liability Comp	oany," "L.L.C.," or "LI.C.")
(If name unavailable, enter alternate nam Liability Company," "L.L.C," or "LLC."	ne adopted for the purpose of transacting business in Florid')	a. The alternate name must include "Limited
_{2.} South Carolina	3.	
(Jurisdiction under the law of which for company is organized)	oreign limited liability (FEI	number, if applicable)
4		
(See :	Date first transacted business in Florida, if prior to registrati sections 605.0904 & 605.0905, F.S. to determine penalty l	on.) iability)
5. 550 North Poir	ıt Road	on.) iability)
Mt. Pleasant, S		10元
EEO North Dain	(Street Address of Principal Office)	第 3
6. 550 North Poin	l Roau	<u> </u>
Mt. Pleasant, S		31 0210
	(Mailing Address)	48-799
7. The name, title or capacity	and address of the person(s) who has/have	authority to manage is/are:
Arthur J. Kepes,	Executive Vice Preside	nt of WRS Inc.,
a South Carolina	a corporation, its Manag	er
		
having custody of records in the	ificate of existence, no more than 90 days old he jurisdiction under the law of which it is on in a foreign language, a translation of the continuous signature of an authorized person	rganized. (A photocopy is not
am aware that any false information submitte	the execution of this document constitutes an affirmation under the din a document to the Department of State constitutes a third de	
Arth	ur J. Képes	<u>, </u>
	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:

Deland Retail Investment, LLC

İf	unavai.	lable,	the a	alternate	to	be used	l in	the	state	of	Florida	is:
----	---------	--------	-------	-----------	----	---------	------	-----	-------	----	---------	-----

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

CT Corporati	on System				
	(Name)				
1200 South I	Pine Island Road				
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
Plantation	FL 33324				
	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.

C T Coporation System

By: Michael Seraphin Asst. Secretary
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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:

DELAND RETAIL INVESTMENT, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on February 28th, 2014, with a duration that is until February 28th, 2114, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 1st day of July, 2014.

Mark Hammond, Secretary of State