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SEGNETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CDX Enterphises, LC 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:		
Jo ANN Gerkey Name of Person		
Boyette, Cummins +NAilos, PLLC Firm/Company		
1635 F. Highway So, Suite 300		
Clenmont, Fl 34711 City/State and Zip Code		
joerker 6 ben lawfirm com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
To Annu Genkey at (352) 394-2103 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 & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certified Copy		



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2014

JOANN GERKEY BOYETTE, CUMMINGS & NAILOS 1635 E. HIGHWAY 50, STE 300 CLERMONT, FL 34711

SUBJECT: DEB & KIM ENTERPRISES, LLC

Ref. Number: W14000047436

We have received your document for DEB & KIM ENTERPRISES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 414A00016591

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

We, the undersigned, do hereby certify to	hat we are the Managers and/or Mana	aging
Members of CDK ENTERPRISES, L (Name of Lin	LC nited Liability Company)	
a limited liability company duly organize	d and existing under the laws of	
STATE OF OHIO (State or Country of Organization)		
Because the name of this foreign limited l	iability company does not satisfy the	
requirements of the s. 608.406, F.S., the li	mited liability company hereby adopts	the
following name to transact business in the	state of Florida:	ونم
DEB & KIM ENTERPRISES, LLC (Name to be used by limited liability company in Florida Company, L.L.C., or LLC.)	. NOTE: Name must end with Limited Liability	SELECTIVE 19
Date: 12/30/13		AN 10: 55 OF SUATE E, FLORIDA
Signature(s) of Manager(s) and/or Managir Libra 17. Smith Debra K. Smith, Member/Manager	ng Member(s): **Multiple buylby** Kimberly Brophey, Member/Sec.1	
· · · · · · · · · · · · · · · · · · ·		

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

IN COMPLIANCE WITH SECTION 603.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. CDK Enterprises, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Deb4 Kim Enterprises, LIC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
Enablity Company, E.E.C., of EEC.
2. UNIO 3. 32-0407768
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
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. 6885 Comp Blvd.
Hanoverton, Ohio 44423 50
(Street Address of Principal Office)
6. 6885 Camp Blod.
Hanoverton, Ohio 44423
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Debra K. Snith, Managing Member
10885 Camo Blod.
HANDUERton, Ohio 44423
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
Delva K. Smith
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 perjury that the facts stated herein are true. I am aware that any 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.)
• • • • • • • • • • • • • • • • • • • •
Debra K. Smith
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:	
CDK Enter Prises, LC	
If unavailable, the alternate to be used in the state of Florida is:	
Debakim Enterprises, LC	
2. The name and the Florida street address of the registered agent and office are:	
K. WAde Boyette, Jr.	NO 19
1635 E Highway 50, Suite 300 Florida Street Address (P.O. Box NOT ACCEPTABLE)	MIC 55
Clermont FL 34711 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.

Khake Brytte, Jr. (Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show CDK ENTERPRISES, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2161671, was organized within the State of Ohio on December 26, 2012, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 2nd day of July, A.D. 2014.

Ohio Secretary of State

Validation Number: 201418301943