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ALLAHASSEEL FLORIBA

COVER LETTER

10:	Registration Section		
	Division of Corporations		

SUBJECT: DES Wholesale, LLC

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:

Allison S. de Aguero Name of Person DES Wholesale, LLC Firm/Company 12600 Deerfield Parkway, Suite 100 Address Milton, Georgia 30004-6130 City/State and Zip Code

tax@diversifiedenergysupply.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allison S. de Aguero

678

828-4305

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 28, 2015

ALLISON S DE AGUERO 12600 DEERFIELD PKWY STE 100 MILTON, GA 30004-6130

SUBJECT: DES WHOLESALE, LLC

Ref. Number: W15000029923

RECEIVED

15 MAY 19 PM 4: 23

SECRETARY OF STATE
TALLAHASSEF FLORIE

We have received your document for DES WHOLESALE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tim Burch Regulatory Specialist II

Letter Number: 815A00008662

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:

(Name of Foldigh Billinea Blacking Co.	mpany; must include "Limited Liability Compa	ny," "L.L.C.," or "LLC.")	
If name unavailable, enter alternate name adopted for Liability Company," "L.L.C," or "LLC.")	r the purpose of transacting business in Florida	The alternate name must include "Limited	
Georgia	₃ 45-160878	37	
(Jurisdiction under the law of which foreign limited company is organized)	isdiction under the law of which foreign limited liability (FEI number, if applicable)		
D. Carlon	Pl dd de dans		
(See sections 605.0	acted business in Florida, if prior to registration 0904 & 605.0905, F.S. to determine penalty lia	u) pility)	
12600 Deerfield Par	kway, Suite 100		
Milton, Georgia 300	04-6130	225 To 14600	
	(Street Address of Principal Office)		
same as above			
		22 2	
	(Mailing Address)	<u> </u>	
		thority to manage is/are	
The name title or canacity and addre	ec of the percon(c) who had/have a		
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Allison Sheffield de A	guero, Sole Membe	r and President	
Allison Sheffield de A	guero, Sole Membe	r and President	
Allison Sheffield de A	guero, Sole Membe	r and President	
Allison Sheffield de Ag 2975 Old Course Dri	guero, Sole Membe ve, Roswell, GA 30	r and President 075	
Allison Sheffield de Ag 2975 Old Course Dri Attached is an original certificate of e	guero, Sole Memberve, Roswell, GA 30 xistence, no more than 90 days old,	r and President 075 duly authenticated by the official	
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Allison Sheffield de Againg Cartificate of e aving custody of records in the jurisdic acceptable. If the certificate is in a foreignust be submitted)	guero, Sole Member ve, Roswell, GA 30 existence, no more than 90 days old, tion under the law of which it is organ language, a translation of the cert	r and President 075 duly authenticated by the official anized. (A photocopy is not	
Allison Sheffield de Again and	xistence, no more than 90 days old, tion under the law of which it is organ language, a translation of the certain signature of an authorized person	r and President 075 duly authenticated by the official anized. (A photocopy is not ifficate under oath of the translator	

Allison Sheffield de Aguero

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.

	nolesale, LLC	Company is:			
If unavailable,	the alternate to be used i	in the state of Florida is:			
				5	
2. The name and the Florida street address of the registered agent and office are:		200		of open g a g	
C T Corporation System			19	1 - 4.1E1	
		(Name)			Normale 1 1 1 1
	1200 South F	Pine Island Road	7018 718 718	in Co	E same
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)	حثر –		
	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.

(Signature)
Danny Verdecchia, Jr. Asst. Secretary

\$ 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 GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED: April 08, 2011 JURISDICTION

: 11028417 : Georgia

PRINT DATE

: March 25, 2015

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal my office that

DES WHOLESALE, LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Brian P. Kemp Secretary of State