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Certified Copies	_ Certificates	of Status			
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SECRETARY OF STATE
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COVER LETTER

	Section *Corporations				b _n
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BJECT:	Dec.	Dee Jer	J. (SAG	LLC	
		Name of Lir	nited Liability Con	npany	
					ess in Florida," Certifica o transact business in Flo
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	Barb	ara Dola	ĥ		
		Nam	e of Person		
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r further information	n concerning this matt	er, please call:			
Andr	Name of Contact		at (954)	377	7033
•	Name of Contact	Person	Area Code	Daytime Teleph	one Number
MAILING .				TREET ADDRES	
Division of C Registration				ivision of Corporat egistration Section	ions
P.O. Box 63			Cl	lifton Building	
Tallahassee,	FL 32314			661 Executive Cent allahassee, FL 3230	
closed is a check fo	_	00 Filing Fee &	□ \$155.00 Filing F Certified Copy		0 Filing Fee, Certificate & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 4, 2015

BARBARA DOLAN 5781 W. SUNRISE BLVD. PLANTATION, FL 33313

SUBJECT: BEE DEE SERVICING LLC

Ref. Number: W15000039263

We have received your document for BEE DEE SERVICING 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):

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 605.0206, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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) 245-6052.

Carol Mustain Regulatory Specialist II

Letter Number: 715A00011784



June 26, 2015

BARBARA DOLAN 5781 W. SUNRISE BLVD. PLANTATION, FL 33313

SUBJECT: BEE DEE SERVICING LLC

Ref. Number: W15000039263

We have received your document for BEE DEE SERVICING 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):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 245-6052.

Carol Mustain Regulatory Specialist II

Letter Number: 615A00013519

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:

BEEDEE SERVICES,	IIC			
	eign Limited Liability Company; mo	ust include "Limited Lia	hility Company," "L.L.C.," or	"LLC.")
If name unavailable, enter al liability Company," "L.L.C.,	Iternate name adopted for the purpo ," or "LLC.")	se of transacting busines	ss in Florida. The alternate nar	ne must include "Limited
Delaware		3 46-2493771		
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI number, if applicable)
May 2015				
	(Date first transacted busin (See sections 605.0904 & 60:	ess in Florida, it prior to	registration.)	
5781 W. Sunrise Blvd.	·	5.0505, F.S. to determin	e penalty hability)	_
Plantation, FL 33313				20. 2
	(Street Address of	Principal Office)		
5. 5781 W. Sunrise Blvd.				
Plantation, FL 33313				
	(Mailing	Address)		
. Name and street addres	ss of Florida registered agent: (F	P.O. Box NOT accept	able)	9 & 6 & 6 & 6 & 6 & 6 & 6 & 6 & 6 & 6 &
	Barbara Dolan		,	三
Name:			<u>-</u>	
Office Address:	5781 W. Sunrise Blvd.		_	
	Plantation		_ , Florida 33313	_
Registered agent's accep	(City)		(Zip code)	
his application, I hereby with the provisions of all s	egistered agent and to accept ser accept the appointment as regis statutes relative to the proper a ition as registered agent (Regis	stered agent and agre	e to act in this capacity. I nnce of my duties, and I an	further agree to compl
8. The name, title or capa	acity and address of the person(s) who has/have author	rity to manage is/are:	
Barbara Dolan, Manager		,	.,	
5781 W. Sunrise Blvd.				···
Plantation, FL 33313				
Attached is a certificate urisdiction under the law of the translator must be su	of existence, no more than 90 de of which it is organized. (If the oubmitted)	ays old, duly authentic	cated by the official having gn language, a translation o	custody of records in the certificate under of
	Signature	e of an authorized person	n	
This document is executed	d in accordance with section 605.	0203 (1) (b) Florida	Statutes I am aware that am	v false information

Typed or printed name of signee

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Barbara Dolan

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BEEDEE SERVICES, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWELFTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BEEDEE SERVICES, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF JANUARY, A.D. 2013.

5278902 8300

150914173

Jeffrey W. Bullock, Secretary of State **AUTHENT CATION:** 2460453

DATE: 06-12-15

You may verify this certificate online at corp.delaware.gov/authver.shtml