

M15000009584

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

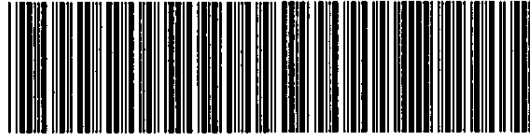
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200279520822

11/30/15--01041--016 **160.00

FILED
2015 NOV 30 PM 2:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DEC 01 2015
J. HARRIS

Dolphins and Rays, LLC
PO Box 6436
Siloam Springs, AR 72761
(479) 215-9334

Division of Corporations
Registration Section
PO Box 6327
Tallahassee, FL 32314

Re: Foreign LLC Registration

To whom it may concern:

Enclosed please find the documents required for registration.

Please feel free to call me with any questions you may have.

Sincerely,

Rhonda H. Favano

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DOLPHINS and RAYS 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:

RHONDA H. FAVANO
Name of Person

DOLPHINS and RAYS LLC
Firm/Company

PO Box 6436
Address

SILVAM SPRINGS, AR 72761
City/State and Zip Code

dopeyfav@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rhonda Favano at (479) 215-9334
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

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. DOLPHINS AND RAYS, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(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.")

2. ARKANSAS
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 47-5278730
(FEI number, if applicable)

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. 19601 HIGHWAY 16
SILVAM SPRINGS, AR 72761
(Street Address of Principal Office)

6. PO BOX 6436
SILVAM SPRINGS, AR 72761
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: LISA SAMPLE

Office Address: 17757 FRONT BEACH ROAD
ATTN SALES OFFICE
PANAMA CITY BEACH, Florida 32413
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

RHONDA FAVANO, MEMBER
PO BOX 6436
SILVAM SPRINGS, AR 72761

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Rhonda Favano
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

RHONDA H. FAVANO
Typed or printed name of signee

2015 NOV 30 PM 2:00
STATE DEPT OF STATE
TALLAHASSEE FLORIDA



**Arkansas Secretary of State
Mark Martin**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, Mark Martin, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

DOLPHINS AND RAYS LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office October 8, 2015.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 3rd day of November 2015.

Mark Martin

Mark Martin

Secretary of State

Online Certificate Authorization Code: 72cb9035c068413

To verify the Authorization Code, visit sos.arkansas.gov