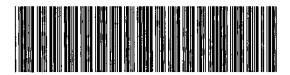
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(Add	dress)	
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ZUIT JUN 19 AM II: 11
SECRETARY OF STATE
ALL AHASSEF FLORID

J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

URRECT. DSF Enterprises 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:

Dan Ford

Name of Person

DSF Enterprises LLC

Firm/Company

318 Parkview Manor

Address

Wentzville, MO 63385

City/State and Zip Code

dataprofx@gmail.com

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

For further information concerning this matter, please call:

Dan Ford

.,435

862-3000

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 Tallahassec, 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



June 8, 2017

DAN FORD 318 PARKVIEW MANOR WENTZVILLE, MO 63385

SUBJECT: DSF ENTERPRISES LLC

Ref. Number: W17000048559

We have received your document for DSF ENTERPRISES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 717A00011641

RECEIVED

IN JUN 19 AND 18

SECRETARY OF STATE

ALLAHASSEE, FLORIDA

2017 JUN 19 AHII: III

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:

		Liabitity Company, must include "Lim					
•	name adopt	ed for the purpose of impascing business in f			ійту Сшпрэлу."	L.L.C." or "Li	.c.";
2. Missouri	which forces	n limited Lability company is organized)	3. <u>4</u>	6-1651155	er, if applicable)		_
·		,		,			
4. <u>n/a</u>	(Da	to first transacted business in Florida, it moor	io cynicimion)				
		te first transacted business in Flunda, if prior e sections 605,0904 & 605,0905, F.S. to dete					
5. 4622 South St F	eters l	Parkway	6. <u>46</u>	S22 South St Peters (Mailing Addre	s Parkwa	<u>⁄ ≌</u>	_ ,
(Street Address of Principal Office) St. Peters, MO 63304		St. Peters, MO 6330					
		····		· · · · · · · · · · · · · · · · · · ·	<u> </u>	==	
	,		-,		SS	2) (2)	-
7. Name and street addr	ess of Flo	orida registered agent: (P.O. Be	x NOT acc	eptable)	in.		
M	InCo	orp Services, Inc.			7	AH II:	Same of the same o
Name:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			9	÷ =	A way
Office Address:	1/88	38 67th Court North			Ş	<u> </u>	
	Loxa	ahatchee		, Florida 33470	•		
APCIONATION IN THIC APPOIL		hereby accept the annaintment	f process for as registered		in this cana	ritu I fuer	
to comply with the provi and accept the obligation	sions of ns of my pacity an	d address of the person(s) who Name and Address: Dan Ford 318 Partners Manor Watter Manor	as registeres er and comp Highstone) hos/have auti	d agent and agree to act in lete performance of my and Kathy Shin on be	luties, and I	am famili	ther agree iar with rices, Inc
to comply with the providend accept the obligation 8. The name, title or capacity: OWNER/MANAG (Use attachments if necess.) 9. Attached is a certificate	pacity and ER	distanter relative to the proposition as enistant depart. (Reduced agent.) (Reduce	as registered and comp Ingnature) hos/have author Title	d agent and agree to act in the lete performance of my defend the lete performance of my defend the lete performance of my defend to manage is/are: or Capacity:	half of InC	am famili	ther agree iar with rices, Inc

STATE OF MISSOURY



John R. Ashcroft Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

DSF Enterprises LLC LC1386127

was created under the laws of this State on the 18th day of March, 2014, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 29th day of April, 2017.

Becretary of Stale

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Certification Number: CERT-04292017-0001