Division of Corporations

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COVER LETTER

	egistration Section ivision of Corporation	s				
UBJECT	D4US, LLC					
CDOLLI		Name of	Limited Liability C	Company		
					ausact Business in Florida," C y company to transact busines	
ease retu	rn all correspondence c	oncerning this matter to the	following:			
	Karen Salazar					
	<u></u>	N. N. S.	ame of Person			
	D4US, LLC					
	w despited to a series for the destination of the d	F	irm Company			
	382 NE 191si S	t., #59205				
			Address	··		
	Miami, FL 331	79-3899				
		City/\$	itate and Zip Code			
	ksalazan@myd4	.com				
		E-mail address: (to be use	d for future annual	report no	tification)	
os further	information concerning	g this matter, please call				
Х	Caron Satezor		415	568-73		
***	Name o	f Contact Person	at (Day	ytime Telephone Number	
D R P.	MAH.ING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, Ft. 32314		STREET ADDRESS: Division of Corporations Registration Section Cliften Building 2651 Executive Center Circle Tailahassee, FL 32301		of Corporations non Section Brilding coutive Center Circle	
	s a check for the follow I \$125.00 Filing Fee	ing amount: □ \$130,00 Filing Fee & Certificate of Status	□ \$155.00 Filio Certified Copy	ig Fee &	☐ \$160,00 Filing Fee, Cer of Status & Certified Copy	

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

IN COMPLENCE WITH SECTION 605.0002, PLORIDA SLATCIEN, THE FOLLOWING INNORMITIED TO REGISTER A FOREIGN, HIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDAY D4US, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LUC.") (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.") Delaware Jarisdiction under the law of which loceign limited liability (boximugue at yearquies) 4/15/17 (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 382 NE 1915t St., #59205 Miami, FL 33179-3899 (Street Address of Principal Office) 382 NE 191si St., #59205 Miami, FL 33179-3899 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable) CT Corporation System Name: 1200 South Pine Island Road Office Address: Plantation . Florida 33324 (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 complywith 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. Janes M. Halpin
Assistant Secretary C T Corporation System 8. The name, title or capacity and address of the person(s) who has have authority to manage is/are: Kuren Salazar, Owner, 382 NE 191st St., #59205, Miami, FL 33179-3899. 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) / 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 \$,817,155, F.S.

Typed or printed name of signee

Karen Saluzar



Page 1

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

DELAWARE, DO HEREBY CERTIFY "D4US, 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 FIRST DAY OF AUGUST, A.D. 2017.

P 18

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Authentication: 202986448

Date: 08-01-17

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