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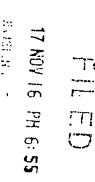
(Requestor's Name)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2017

DIANNE WRIGHT 828 WHITE ST, #3 KEY WEST, FL 33040

SUBJECT: 2 DEW LTD, LLC Ref. Number: W17000084996

We have received your document for 2 DEW LTD, 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):

You failed to make the correction(s) requested in our previous letter.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 617A00022349

17 NOV 16 PH LE:3

www.sunbiz.org

See attached certificate of good slanding

Division of Composations DO POV 6227 Tellahassas Florida 22214



October 24, 2017

DIANNE WRIGHT 828 WHITE ST, #3 KEY WEST, FL 33040

SUBJECT: 2 DEW LTD, LLC Ref. Number: W17000084996

We have received your document for 2 DEW LTD, 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 registered agent must sign accepting the designation.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 517A00021442

Octavia L Simmons Regulatory Specialist II

ALLANE

COVER LETTER

Registration Section Division of Corporations

TO:

	-	Name of	Limited Liability Company	,
The enclosed " Existence, and	Application by For check are submitte	eign Limited Liability Comp d to register the above refer	pany for Authorization to Tenced foreign limited liabil	ransact Business in Florida," Certificate of ity company to transact business in Florida
Please return a	ll correspondence o	concerning this matter to the	following:	
	Dianne E. Wrig	ht		
		N	ame of Person	
	Keys Quality M	Ianagement, LLC		
		Fi	irm/Company	
	828 White St. #	3		
			Address	
	Key West, FL	33040		
		City/S	tate and Zip Code	
	dwright@yeslear			
		E-mail address: (to be used	d for future annual report n	otification)
For further info	ormation concernin	g this matter, please call:		
Bobb	ie Grimes		305 296-9	090
	Name o	of Contact Person	Area Code D	aytime Telephone Number
Divisi Regis P.O. I	LING ADDRESS: ion of Corporations tration Section 30x 6327 nassee, FL 32314		Divisio Registr Clifton 2661 E	ET ADDRESS: n of Corporations ation Section Building xecutive Center Circle ssee, FL 32301
	heck for the follow 25.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 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:

	first transacted business in Florida, ections 605.0904 & 605.0905, F.S	, if prior to registration.	34-1966436 (FEI nu	imber, if applicable)	
O1/01/2017 (Date (See so See so See so See so (Street Address of Principal Office)	first transacted business in Florida, ections 605.0904 & 605.0905, F.S	, if prior to registration.)	(FEI nu	imber, if applicable)	
(Steet Address of Principal Office	ections 605.0904 & 605.0905, F.S				
(See so (Street Address of Principal Office	ections 605.0904 & 605.0905, F.S				
			900 Flagler St.		
Lima, OH 45805	ce)		(Mading A	ddress)	
•		<u> </u>	Key West, FL 33040	<u> </u>	
		-		551	
				151	三丁
. Name and street address of Flor	ida registered agent: (P	.O. Box NOT a	cceptable)	H.181.	سريد <u>س</u> ک
Name: Bobbie	J. Grimes			٠.	到方
					PH.
Office Address: 828 Wh	nite St. #3		<u>. </u>		ون يا
Key W	est		, Florida 33040		4.73
	(City)		(Zip c	ode)	<u>G</u>
	ll statutes relative to the	tment as registe. proper and&con	red agent and agree to a splete performance of m		ty. I further aş
	ll statutes relative to the osition as registered ag	tment as registed proper and con gent.	red agent and agree to a	ct in this capacit	ty. I further aş
	ll statutes relative to the osition as registered ag	tment as registe. proper and&con	red agent and agree to a	ct in this capacit	ty. I further aş
8. The name, title or capacity and	Il statutes relative to the position as registered ag	tment as register proper and congent. red agent's signature) who has/have a	red agent and agree to an aplete performance of m	ct in this capacity duties, and I a	ty. I further aş m familiar wil
and accept the obligations of my p	Il statutes relative to the osition as registered ag	tment as register proper and congent. red agent's signature) who has/have a	red agent and agree to a oplete performance of m	ct in this capacity duties, and I a	ty. I further aş m familiar wil
8. The name, title or capacity and	address of the person(s) Name and Address: Donald E. Wright	tment as register proper and congent. red agent's signature) who has/have a	red agent and agree to an aplete performance of m	ct in this capacity duties, and I a	ty. I further aş m familiar wil
8. The name, title or capacity and Title or Capacity:	address of the person(s) Name and Address: Donald E. Wright 2300 West Wayne St.	tment as register proper and congent. red agent's signature) who has/have a	red agent and agree to an aplete performance of m	ct in this capacity duties, and I a	ty. I further aş m familiar wil
8. The name, title or capacity and Title or Capacity:	address of the person(s) Name and Address: Donald E. Wright	tment as register proper and congent. red agent's signature) who has/have a	red agent and agree to an aplete performance of m	ct in this capacity duties, and I a	ty. I further aş m familiar wil
8. The name, title or capacity and Title or Capacity:	address of the person(s) Name and Address: Donald E. Wright 2300 West Wayne St.	tment as register proper and congent. red agent's signature) who has/have a	red agent and agree to an aplete performance of m	ct in this capacity duties, and I a	ty. I further aş m familiar wil
8. The name, title or capacity and Title or Capacity: Member	address of the person(s) Name and Address: Donald E. Wright 2300 West Wayne St. Lina, OH 45805 Dianne E. Wright 2300 West Wayne St.	tment as registe. proper and content. red agent's signature)) who has/have a	red agent and agree to an aplete performance of m	ct in this capacity duties, and I a	ty. I further aş m familiar wil
8. The name, title or capacity and Title or Capacity: Member	address of the person(s) Name and Address: Donald E. Wright 2300 West Wayne St. Lima, OH 45805	tment as registe. proper and content. red agent's signature)) who has/have a	red agent and agree to an aplete performance of m	ct in this capacity duties, and I a	ty. I further aş m familiar wil

Typed or printed name of signee

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I. Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show 2 DEW, LTD., an Ohio Limited Liability Company, Registration Number 1236723, was organized within the State of Ohio on June 18, 2001, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 13th day of November, A.D. 2017.

Ohio Secretary of State

for Hustel

Validation Number: 201731703318