## 19110000081M

(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	_ Certificates	s of Status					
Special Instructions to Filing Officer:  CERT W18-16513							

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18 FEB 20 PR 4 95 SECRETARY OF STATE MIT ANALYSEF FLORIDA

S. WARREN FEB 2 0 2018



February 19, 2018

THEODORE FARNSWORTH 270 NE 18TH STREET, PH 7 MIAMI, FL 33132

SUBJECT: DAY DREAMER CHARTER LLC

Ref. Number: W18000016512

We have received your document for DAY DREAMER CHARTER 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):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 918A00003471

## **COVER LETTER**

TO:	Registration Section Division of Corporation	ns				
SUBJE	CT:	1 OPLAMER Name of I	CHARTI Limited Liability Co	empany	LLC	_
		eign Limited Liability Comp d to register the above refere				
Please re	eturn all correspondence of	oncerning this matter to the	following:			
		SHEDOOPE H	APNSW ame of Person	OPIt	<u> </u>	_
		DAY OREAM	en CHAR	TEL	LLC	_
	<i>a</i>	70 HE 18	HL ST 1 Address	PH	7	
		1	FL 3 tate and Zip Code		32	_
For furt	ner information concernin	E-mail address: (to be used	d for future annual r	eport notif	fication)	
		f Contact Person	_ at (	3 <i>1</i> Dayti	ime Telephone Number	<u>-</u>
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		I I C	Division o Registratio Clifton Bu 2661 Exec		
Enclose	d is a check for the follow ☐ \$125.00 Filing Fee	ing amount:  \$\Bigsim \text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\$}}\$}}}\$}}}}} \end{length}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	□ \$155.00 Filing Certified Copy	Fee &	\$160.00 Filing Fee,	

## 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: DAY DREAMER CHARTEL U.C.
(Name of Foreign Limited Liability Company, "ML.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," or 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 245 NEIPHST PH7 Office Address: 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Title or Capacity: Name and Address: Name and Address: (Use attachments if necessary) 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) 10. 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.

Delaware
The First State

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

DELAWARE, DO HEREBY CERTIFY "DAY DREAMER CHARTER 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 FOURTEENTH DAY OF FEBRUARY, A.D. 2018.

Authentication: 202153393

Date: 02-14-18