

M18000002809

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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18 MAR 21 PM 12:18
CORPORATION DIVISION
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 7, 2018

DREW DIXON
1134 BOND AVE
REXBURG, ID 83440

SUBJECT: DRY SWAMP ACRES LLC
Ref. Number: W18000021933

We have received your document for DRY SWAMP ACRES 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):

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: 018A00004594

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Dry Swamp Acres 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:

Drew Dixon

Name of Person

Dry Swamp Acres LLC

Firm/Company

1134 Bond Ave

Address

Rexburg, ID 83440

City/State and Zip Code

dddryswampacres@gmail.com

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

For further information concerning this matter, please call:

Drew Dixon

801

230-7182

at ()

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. Dry Swamp Acres 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. Idaho 3. 82-1876585
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 1134 Bond Ave 6. 1134 Bond Ave
(Street Address of Principal Office) (Mailing Address)
Rexburg, ID 83440 Rexburg, ID 83440

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

Name: Drew Dixon

Office Address: 27615 US Hwy 27, Suite 109 #166

Leesburg, Florida 34748
(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:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Owner</u>	<u>Drew Dixon</u>		
	<u>1134 Bond Ave</u>		
	<u>Rexburg, ID 83440</u>		

(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.

[Signature]
Signature of an authorized person

Drew Dixon
Typed or printed name of signee

State of Idaho

Office of the Secretary of State

CERTIFICATE OF EXISTENCE

OF

DRY SWAMP ACRES, LLC

File Number W-184988

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that I am the custodian of the limited liability company records of this State.

I FURTHER CERTIFY That the records of this office show that the above-named limited liability company filed a certificate of organization in Idaho on 6/19/2017.

I FURTHER CERTIFY That the limited liability company's certificate of organization has not been dissolved.

Dated: 3/16/2018 2:26 PM



A handwritten signature in black ink, appearing to read "Lawrence Denney", with a long, sweeping underline.

SECRETARY OF STATE