

M8000006771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

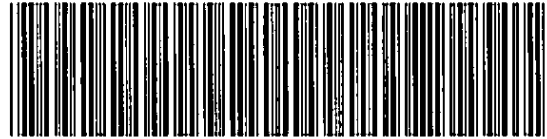
Special Instructions to Filing Officer:

2017 MAY -3 PM 4:51

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W17-38611

Office Use Only



200298056842

05/04/17--01006--028 **1041.35

06/12/18--01006--002 **136.75

FILED
18 JUN 20 PM 5:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07-20-'18 [REDACTED] FROM-Asset Quest

239-313-7099

T-287 P0001/0002 F-137

ATTN: OCTAVIA SIMMONS

RE: W17000038611

PAGES: 2 INCLUDING COVER

Good Afternoon,

Please see application signed by Daniel Barres accepting registered agent designation.

Thanks!

Dawn Steckelberg

to: 850-245-6030
From: 239-541-8448



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2017

DANIEL STECKELBERG
2180 W FIRST ST, #302
CAPE CORAL, FL 33901

SUBJECT: TARPON D PROPERTIES, LLC
Ref. Number: W17000038611

We have received your document for TARPON D PROPERTIES, LLC and your check(s) totaling \$1041.25. 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.

The registered agent must sign accepting the designation.

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

Octavia I Simmons
Regulatory Specialist II

Letter Number: 517A00008852

69

RECEIVED

2018 JUN -8 AM 11:14

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

Mailed Letter
to Request Certificate
on 7/13/17

138.15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TARPON PROPERTIES, A FOREIGN LIMITED LIABILITY COMPANY
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:

DAWN STECKELBERG

Name of Person

ASSET QUEST, LLC

Firm/Company

2180 W FIRST ST # 302

Address

CAPE CORAL FL 33901

City/State and Zip Code

dawn@assetquest.com

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

For further information concerning this matter, please call:

DAWN STECEKLEBRG at (239) 541-8448
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:

- | | | | |
|---|---|--|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate
of Status & Certified Copy |
|---|---|--|---|

STATE OF FLORIDA
APPLICATION OF 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. TARPON PROPERTIES, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

TARPON D PROPERTIES, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 38-3925986

(FEI number, if applicable)

4. 02/27/2014

(Date first transacted business in Florida, if prior to registration.)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2180 W FIRST ST # 302

(Street Address of Principal Office)

FORT MYERS, FL 33901

6. PO BOX 2569

(Mailing Address)

FORT MYERS, FL 33902

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

Name: DANIEL BARRES

Office Address: 2180 W FIRST ST # 302

FORT MYERS

(City)

Florida 33901

(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.

DANIEL BARRES

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

MANGER

ASSET QUEST, LLC

PO BOX 2569

FT MYERS FL 33902

MANAGER

DANIEL BARRES

PO BOX 2569

FT MYERS, FL 33902

(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)

Signature of authorized person

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.

DANIEL BARRES

Typed or printed name of signer

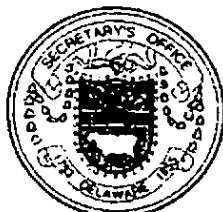
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 JUN 20 PM 5:33
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "TARPON PROPERTIES 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 TWENTY-THIRD DAY OF MAY, A.D. 2018.



5489044 8300

SR# 20183994648

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202749124

Date: 05-23-18