

M18000010499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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W18-96450
(Business Entity Name)

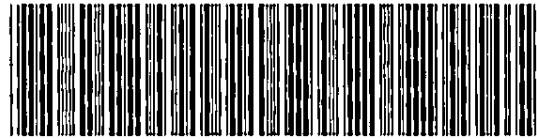
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Dyermark Acquisition Services, 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:

Lansford Dyer

Name of Person

Dyermark Acquisition Services, LLC

Firm/Company

3363 Sedgwick Ave, Apt 6J

Address

Bronx, NY 10463

City/State and Zip Code

ldyer@dyermark.biz

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

For further information concerning this matter, please call:

Lansford Dyer

Name of Contact Person

at (917) 593 0458

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 2, 2018

LANSFORD DYER
DYERMARK ACQUISITION SERVICES, LLC
3363 SEDGWICK AVENUE, APT 6J
BRONX, NY 10463

SUBJECT: DYERMARK ACQUISITION SERVICES, LLC
Ref. Number: W18000096450

We have received your document for DYERMARK ACQUISITION SERVICES, 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.

Returning application ONLY for registered agent signature.

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.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 618A00022649

**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. Dyermark Acquisition Services, 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. New York
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(FEI number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 3363 Sedgwick Ave
(Street Address of Principal Office)
Apt 6J
Bronx, NY 10463
6. 3363 Sedgwick Ave
(Mailing Address)
Apt 6J
Bronx, NY 10463

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

Name: Ernie Dyer

Office Address: 8140 SW 24th Street, # 304
North Lauderdale, Florida 33068
(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.

X _____
(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>Member</u>	<u>Angela Dyer</u> <u>3363 Sedgwick Ave</u> <u>Apt 6J</u> <u>Bronx, NY 10463</u>	<u>Managing Member</u>	<u>Lansford Dyer</u> <u>3363 Sedgwick Ave</u> <u>Apt 6J</u> <u>Bronx, NY 10463</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 of an authorized person

LANSFORD Dyer
Typed or printed name of signer

State of New York
Department of State } ss:

I hereby certify, that DYERMARK ACQUISITION SERVICES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/04/2014, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



FILED
SECRETARY OF STATE
2014 NOV 19 PM 12:15

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 04th day of October two
thousand and eighteen.*

*Brendan W. Fitzgerald
Executive Deputy Secretary of State*