

M20000005078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

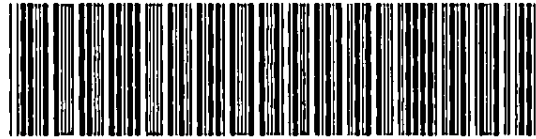
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20 JUN -8 PM 4:46

COVER LETTER

Registration Section  
Division of Corporations

SUBJECT: INNOVATIVE Development Enlightenment Group LLC  
Name of Limited Liability Company

enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of  
Filing, 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:

Dwight E. Sutton  
Name of Person

5319 Lake Jessamine DR  
Firm/Company  
Address

Orlando FL 32839  
City/State and Zip Code

Dwight@innovativedeg.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dwight Sutton at ( 223 ) 322-8104  
Name of Contact Person Area Code Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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

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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. Innovative Development Enlightenment Group LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Innovative Development Enlightenment Group 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. Commonwealth of Pennsylvania 3. 82-252398 C  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. April, 01, 2020  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 37 N Orange Ave Suite 500  
(Street Address of Principal Office)

6. 37-N-Orange Ave Suite 500  
(Mailing Address)

Orlando FL 32801

Orlando FL 32801

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

Name: Kevin R. Sullivan

Office Address: 5319 Lake Jessamine dr

Orlando, Florida 32839  
(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.

Kevin R. Sullivan  
(Registered agent's signature)

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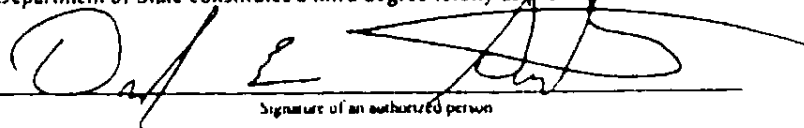
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]

<u>Title or Capacity:</u>		<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>	
<input type="checkbox"/> Manager	Name	Dwight E. Sutton	<input type="checkbox"/> Manager	Name	
<input type="checkbox"/> Member	Address	5319 Lake Jeannette	<input type="checkbox"/> Member	Address	
<input checked="" type="checkbox"/> Authorized Person		DE, Orlando FL 32839	<input type="checkbox"/> Authorized Person		
<input type="checkbox"/> Other			<input type="checkbox"/> Other		
<input type="checkbox"/> Manager	Name		<input type="checkbox"/> Manager	Name	
<input type="checkbox"/> Member	Address		<input type="checkbox"/> Member	Address	
<input type="checkbox"/> Authorized Person			<input type="checkbox"/> Authorized Person		
<input type="checkbox"/> Other			<input type="checkbox"/> Other		
<input type="checkbox"/> Manager	Name		<input type="checkbox"/> Manager	Name	
<input type="checkbox"/> Member	Address		<input type="checkbox"/> Member	Address	
<input type="checkbox"/> Authorized Person			<input type="checkbox"/> Authorized Person		
<input type="checkbox"/> Other			<input type="checkbox"/> Other		
<input type="checkbox"/> Manager	Name		<input type="checkbox"/> Manager	Name	
<input type="checkbox"/> Member	Address		<input type="checkbox"/> Member	Address	
<input type="checkbox"/> Authorized Person			<input type="checkbox"/> Authorized Person		
<input type="checkbox"/> Other			<input type="checkbox"/> Other		

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

Dwight E Sutton  
Typed or printed name of signer

Received  
6/18/20

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

05/13/2020

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Innovative Development Enlightenment Group, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

*Kathey Bookman*

Secretary of the Commonwealth

Certification Number: TSC200513100533-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 1, 2020

DWIGHT E SUTTON  
5319 LAKE JESSAMINE DR  
ORLANDO, FL 32839 US

SUBJECT: INNOVATIVE DEVELOPMENT ENLIGHTMENT GROUP, LLC  
Ref. Number: W20000052972

We have received your document for INNOVATIVE DEVELOPMENT ENLIGHTMENT GROUP, LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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

Laura D Chang  
Regulatory Specialist II

Letter Number: 520A00010756

*6/8 Received members page WDC*