# M20000010657

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TO: Registration Section
Division of Corporations

Please return all correspondence concerning this matter to the following:

SUBJECT:	D & S RENTAL PROPERTIES LLC
	Name of Limited Liability Company
The enclose	d "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

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.

BETTINA DEJESUS Name of Person D & S RENTAL PROPERTIES LLC Firm/Company 226 COUNTY ROAD 345 Address JONESBORO, AR 72401 City/State and Zip Code BD.DSRENTALPROPERTIES@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Daytime Telephone Number Name of Contact Person STREET ADDRESS: MAILING ADDRESS: Division of Corporations Division of Corporations Registration Section Registration Section Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

\$160.00 Filing Fee, Certificate

of Status & Certified Copy

Enclosed is a check for the following amount:
Please make check payable to: FLORIDA DEPARTMENT OF STATE

\$125.00 Filing Fee Status S155.00 Filing Fee & 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: D & S RENTAL PROPERTIES LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") D & S FLORIDA RENTALS LLC (If name unavailable, once alternate name adopted for the purpose of transacting business in Florida. The alternate name most include "Limited Liability Company," "L.L.C." or "LEC.") (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) (Street Address of Principal Office) JONESBORO, AR 72401 JONESBORO, AR 72401 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 7901 4th St N STE 300 Office Address: St. Petersburg 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. 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]: Title or Capacity: Name and Address: Name and Address: Title or Capacity: Name: \_ **BETTINA DEJESUS** Manager Manager 226 COUNTY ROAD 345 226 COUNTY ROAD 345 Address: ✓ Member Member [ Address: JONESBORO, AR 72401 JONESBORO, AR 72401 Authorized Authorized Person Person Other\_\_\_\_\_ Other\_ Other\_\_\_ Other Manager Manager Name: Manager Name: Member Address: \_\_\_\_\_\_ Member Address: \_\_\_\_\_\_ Authorized Authorized Person Person Other \_\_\_\_\_ Other Other\_\_\_\_\_ Other\_ Manager Manager Member Address: Member Address: \_\_\_\_\_ Authorized Authorized Person Person Other\_ Other\_\_\_\_\_ □Other \_\_\_\_\_ Other\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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

Typed or printed name of signee

**BETTINA DEJESUS** 



## Arkansas Secretary of State John Thurston

State Capitol Building • Little Rock, Arkansas 72201-1094 • 501-682-3409

### **Certificate of Good Standing**

I, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

#### D & S RENTAL PROPERTIES, LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office January 8, 2016.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 3rd day of November 2020.

Iohn Thurston iline Certificate Authorization Code: 119691a7bc6e29f Cecretary of State To verify the Authorization Code, visit sos.arkansas.gov

hn Thurste



October 27, 2020

BETTINA DEJESUS 226 COUNTY ROAD 345 JONESBORO, AR 72401 US

SUBJECT: D & S RENTAL PROPERTIES LLC

Ref. Number: W20000124631

We have received your document for D & S RENTAL PROPERTIES LLC and your check(s) totaling \$130.00. 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.

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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 320A00021406

RECEIVED NOV 0.9 2020

\* Returning with required document www.sunbiz.org attached to back-BICS

Division of Cornerations - P.O. ROY 6397 - Tallahasson, Florida 39314