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Account#: I20000000088

Date:	10/01/2021	
Name:	Merritt Walker	
	f:1491113	
		TIVE MILLWORK, LLC
✓ Articl	es of Incorporation/Authoriza	ation to Transact Business
Ame	ndment	
☐ Char	ige of Agent	
☐ Reins	statement	
Conv	version	
☐ Merg	er	
☐ Disso	plution/Withdrawal	
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Signature: _	m	

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COVER LETTER

TO:

Registration Section

Distinctive Millwork, LLC	
Nan	ne of Limited Liability Company
closed "Application by Foreign Limited Liability ice, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Cert e referenced foreign limited liability company to transact business in
return all correspondence concerning this matter	to the following:
Daniel Shear	
	Name of Person
Artisan Design Group, LLC	
<u> </u>	Firm/Company
3401 Olympus Blvd., Suite 450	
	Address
Dallas, Texas 75019	
(City/State and Zip Code
Dan.Shear@adgus.net	
E-mail address: (to b	be used for future annual report notification)
ther information concerning this matter, please ca	all:
Daniel Shear	817 424-3076 at (
Name of Contact Person	at ()
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, Fl. 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE	PARTMENT OF STATE
	PARTMENT OF STATE See & S155.00 Filing Fee &

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTEX THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

elaware					LI,C.")
		2			
(Jurisdiction under the law of whic	h foreign limited liability company is organized)	٥.	(FEI number, if app	nlicable)	•
Upon qualification					
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	o registration	n.) Liabdin i		
1217 Clint Moore Road	ince technic by one to be and the transfer				
et Address of Principal Office)		6.	3401 Olympus Blvd., Suite 450 (Mailing Address)		-
Воса Raton, Florida 3348	87		Dallas, Texas 75019		
					-
				<u>155</u> .	
					- -
Name and <u>street address</u> (of Florida registered agent: (P.O. Bo	x <u>NOT</u>	acceptable)	1001-	
Name:	C T Corporation System				•
-	1200 C				•
Office Address:	1200 South Pine Island Road			25.0	
	Plantation		33324		
-	(Cny)		, Florida(Zip code)		

(Registered agent's signature)

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■ Manager	Name: EuroMill LLC	□Manager	Name: Laurence Barr
■ Member	Address: 3401 Olympus Blvd., Suite 450	□Member	Address: 3401 Olympus Blvd., Suite 450
□Authorized	Dallas, Texas 75019	■Authorized	Dallas, Texas 75019
Person		Person	
□Other	□Other	□Other	Other
□Manager	Name: Wayne Joseph	∃Manager	Name:
□Member	Address: 3401 Olympus Blvd., Suite 450	∐Member	Address: 3401 Olympus Blvd., Suite 450
■ Authorized	Dallas, Texas 75019	■ Authorized	Dallas, Texas 75019
Person		Person	
□ Other	□Other	□Other	□Other
□Manager	Name:	□Manager	Name: 5 2 Address: 5 7
□Nember	Address:	□Member	Address:
□Authorized		□Authorized	ξ
Person		Person	
□Other		□Other	전한 55

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.

Daviel Shear	Signature of an authorized person	
Daniel Shear		
	Exped or printed name of signee	

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DISTINCTIVE MILLWORK, 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-SEVENTH DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DISTINCTIVE MILLWORK, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.





Authentication: 204258157

Date: 09-27-21

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SR# 20213352282