

M 22 000002442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

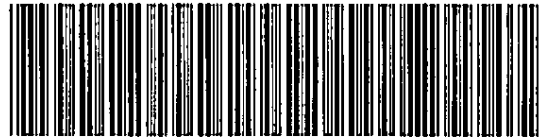
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800380080358

02/03/22--01014--017 **160.00

FILED
2022 FEB 3 PM 2:21
CLERK OF SUPERIOR COURT
STATE OF FL

S. HAWKES
FEB - 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DCB Land Holdings 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:

Dylan Bagwell

Name of Person

DCB Land Holdings LLC

Firm/Company

4716 Avery Grace Drive

Address

Addis, La 70710

City/State and Zip Code

dylan@cesgulfsoath.com

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

For further information concerning this matter, please call:

Buddy Trahan

832

5062575

At ()

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

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

IN COMPLIANCE WITH SECTION 865.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. DCB I and Holdings LLC

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

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

Louisiana

2.

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

3.

(Tax number, if applicable)

4.

(Date first commenced business in Florida, if prior to registration.)
(See sections 602.0904 & 602.0905, F.S. to determine penalty liability)

4716 Avery Grace Drive Addis, La 70710

5.

(Street Address of Principal Office)

6.

(Mailing Address)

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

Name: Linda Harrison

Office Address: 2177 Alazqua Dr.

Longwood

(City)

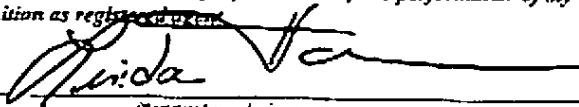
Florida

32779

(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.



(Registered agent's signature)

RECEIVED
JAN 3 - 3 PM 2:21

FILED

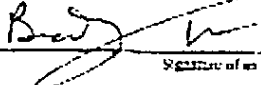
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☐ Manager	Name: <u>Dylan J Bagwell</u>	☐ Manager	Name: _____
☒ Member	Address: <u>4716 Avery Grace Dr.</u>	☐ Member	Address: _____
☒ Authorized	Address: <u>La. 70710</u>	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
 ☐ Manager	Name: <u>Chet Medlock</u>	 ☐ Manager	Name: _____
☒ Member	Address: <u>13074</u>	☐ Member	Address: _____
☒ Authorized	Address: <u>Bluff Road Geismar, La 70734</u>	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
 ☐ Manager	Name: <u>Buddy Trahan</u>	 ☐ Manager	Name: _____
☒ Member	Address: <u>323 Shadows Bend Dr. Baton R.</u>	☐ 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. 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
 Buddy Trahan

 Typed or printed name of signer



R. Kyle Ardoin
SECRETARY OF STATE

As Secretary of State of the State of Louisiana I do hereby Certify that

the Articles of Organization of

DCB LAND HOLDINGS, L.L.C.

Domiciled at ADDIS, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on July 20, 2021,

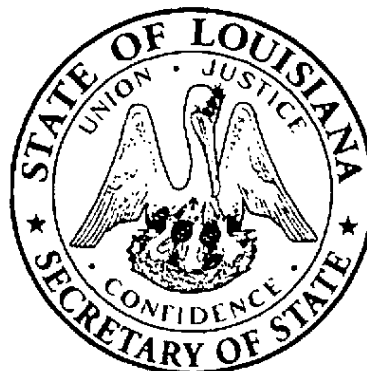
I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

January 29, 2022

Secretary of State

Web 44516324K



Certificate ID: 11518690#2CS93

To validate this certificate, visit the following web site, go to **Business Services**, **Search for Louisiana Business Filings**, **Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov