

8/3/22, 3:05 PM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.  
Account Number : I20010000062  
Phone : (323)962-8600  
Fax Number : (323)389-0502

2022 Aug -3 PM 3:05

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**Foreign Limited Liability Company  
DEBY CONSTRUCTION LLC**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$155.00

2022 Aug -3 PM 4:40

S. FRANKLIN  
AUG - 4 2022

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DEBY CONSTRUCTION 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:

Cheyenne Moseley

\_\_\_\_\_  
Name of Person

Legalzoom.com, Inc.

\_\_\_\_\_  
Firm/Company

101 N Brand Blvd 11th Fl

\_\_\_\_\_  
Address

Glendale, CA 91203

\_\_\_\_\_  
City/State and Zip Code

doneby.de@gmail.com

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

For further information concerning this matter, please call:

Cheyenne Moseley

800

773-0888

at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
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:

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

DFE Construction LLC

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

2. Michigan 3. 87-2154856  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEL number, if applicable)

4. 6-10-2022  
(Date first transacted business in Florida, if prior to registration. See sections 605.0901 & 605.0905, F.S. to determine penalty liability.)

5. 819 SW grand Reserves Blvd 6. 819 SW grand Reserves Blvd  
(Street Address of Principal Office) (Mailing Address)

Port Saint Lucie, FL 34986

Port Saint Lucie, FL 34986

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

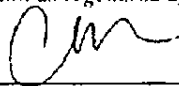
Name: UNITED STATES CORPORATION AGENTS, INC.

Office Address: 5575 S. Semoran Blvd., Suite 36

Orlando, Florida 32822  
(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.*



(Registered agent's signature)

CHEYENNE MOSELEY, ASSISTANT SECRETARY,  
UNITED STATES CORPORATION AGENTS, INC.

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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):

**Title or Capacity:** **Name and Address:**

☐ Manager Name: Donald Eby

☒ Member Address: 819 SW Grand Reserves Blvd

☐ Authorized Port Saint Lucie, Florida 34986

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

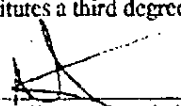
Person \_\_\_\_\_

☐ 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.

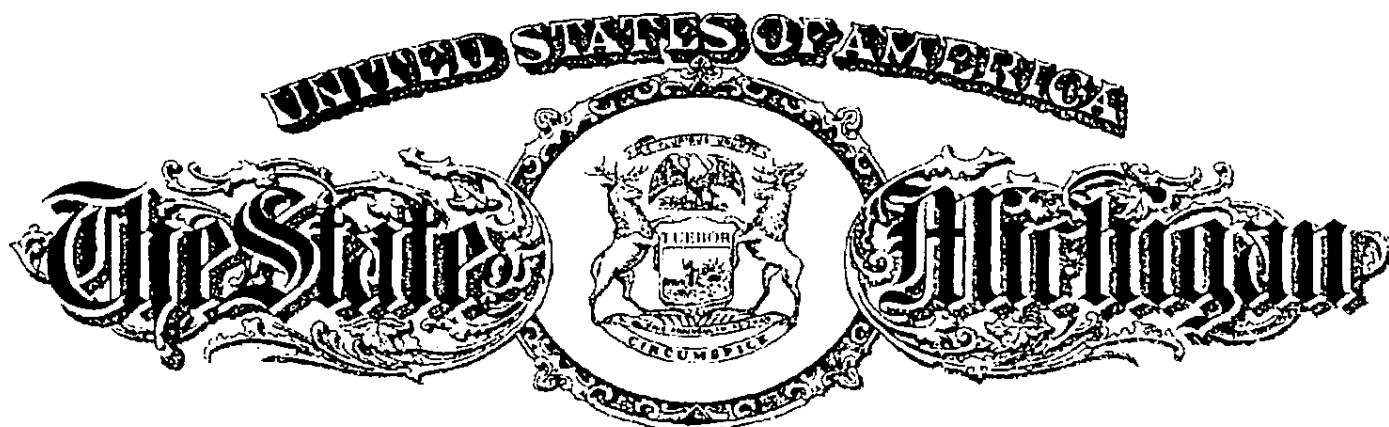
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must 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

Donald Eby

Typed or printed name of signee



**Department of Licensing and Regulatory Affairs**  
Lansing, Michigan

*This is to Certify That*  
**DEBY CONSTRUCTION LLC**

*was validly authorized on August 11, 2021, as a Michigan*  
**DOMESTIC LIMITED LIABILITY COMPANY**  
*and said limited liability company is validly in existence under the laws of this state and has satisfied its*  
*annual filing obligations.*

*This certificate is issued pursuant to the provisions of 1993 PA 23 to attest to the fact that the company is*  
*in good standing in Michigan as of this date.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit*  
*given it in every court and office within the United States.*



*Sent by electronic transmission*

Certificate Number: 22070609602

*In testimony whereof, I have hereunto set my hand,*  
*in the City of Lansing, this 26th day of July, 2022.*

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau