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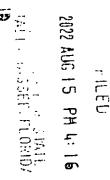
(Re	equestor's Name)	
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COVER LETTER

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Registration Section

TO:

Div	ision of Corporations				
SUBJECT:	DM ENGINEERS PLLC		<u>ئ</u>	•	<i>(</i> *
	Nam	ne of Limited Liability Compa	any		_
The enclosed Existence, ar	d "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization referenced foreign limited lia	to Transact Busing ability company to	ess in Florid o transact bu	a," Certificate o siness in Florid
Please return	all correspondence concerning this matter t	to the following:			
	MARIO MENDOZA				
		Name of Person	.		_
	DM ENGINEERS PLLC				
		Firm/Company			
	45-08 40TH ST., UNIT 1A - OFFICE	:			
		Address			_
	SUNNYSIDE, NY 11104				
		City/State and Zip Code			
	mmendoza@dm-engineers.com				
	E-mail address: (to be	e used for future annual repo	rt notification)		_
For further in	nformation concerning this matter, please ca	all:			
MA	ARIO MENDOZA	631 27 at ()	59362		
	Name of Contact Person	Area Code	Daytime Telepho	one Number	_
Reg Div P.C	iling Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address: Registration Sectio Division of Corpor The Centre of Tall 2415 N. Monroe S	rations ahassee treet, Suite 810)	
Plea	losed is a check for the following amount: ase make check payable to: FLORIDA DEF \$125.00 Filing Fe Certificate of	ee & 🗏 \$155.00 Filing F	ee & 🔲 \$160.	_	e. Certificate ertified 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:

1. DM ENGINEERS LLC (Name of Foreign	Limited Liability Company; must include "Limite	d Liability Company," "L.L.C.," or "El.	C.")
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in F	orida. The alternate name must include "Limi	ited Liability Company," "L.L.C," or "Ll.C.")
NEW YORK STATE		_	
(Jurusdiction under the law of w	hich foreign limited liability company is organized)	3(FEI	number, if applicable}
NOT APPLICABLE			
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.) ine penalty liability)	
8339 VIA LEONESS		8339 VIA LEONESSA	
Street Address of Principal Office)		6. (Mailing Address)	
BOCA RATON, FLO	RIDA 33433	BOCA RATON, FLOR	IDA 33433
7. Name and <u>street addre</u>	ALVARO BOLANOS	NOT acceptable)	
Office Address:	8339 VIA LEONESSA		
	BOCA RATON	33433 , Florida(Zip co	
	(City)	(Zip co	xde)
designated in this applicate comply with the provis	otance: egistered agent and to accept service of parties. I hereby accept the appointment accept so the proper sof my position as registered agent. Approved (Registered agent's	s registered agent and agree to and complete performance of t	act in this capacity. I further ag

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:	Title or Capacity	Name and Address
□Manager	Name: ALVARO BOLANOS	□Manager	Name: MARIO MENDOZA
□Member	Address: 8339 VIA LEONESSA	■Member	Address:
■Authorized	BOCA RATON. FL 33433	□Authorized	UNIT 1A - OFFICE
Person		Person	SUNNYSIDE, NY 11104
Other	Other	Other	Other
∃Manager	Name: RONALD DIAZ	□Manager	Name:
■ Member	Address: 45-08 40TH ST.,	□Member	Address:
□Authorized	UNIT 1A - OFFICE	□Authorized	
Person	SUNNYSIDE, NY 11104	Person	
□Other	Other	□Other	Other
∃Manager	Name:	□Manager	Name:
∃Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other

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.

AUDROF BOLANDS		
	Signature of an authorized person	
	ALVARO BOLANOS	
	Typed or printed name of signer	

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

1, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: DM ENGINEERS PLLC

DOS ID Number: 4958693

Entity Type: DOMESTIC PROFESSIONAL SERVICE LIMITED LIABILITY COMPANY

Entity Status: EXISTING

Date of Initial Filing with DOS: 06/07/2016

Statement Status: CURRENT Statement Due Date: 06/30/2024

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on August 02, 2022 at 01:53 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hugha

By Brendan C. Hughes Executive Deputy Secretary of State

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