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T. LEMIEUX

JUN - 3 2023

COVER LETTER

TO:

Registration Section Division of Corporations

Nam	ne of Limited Liability Company		
	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.		
Please return all correspondence concerning this matter t	to the following:		
LLOYD L DELATOUR, JR.			
	Name of Person		
N/A			
	Firm/Company		
137 BASAL STREET			
	Address		
INLET BEACH, FL 32461			
C	City/State and Zip Code		
GBOFDACULA@BELLSOUTH.NET			
E-mail address: (to be	e used for future annual report notification)		
For further information concerning this matter, please ca	dl:		
LLOYD L. DELATOUR, JR.	678 910-0789 at ()		
Name of Contact Person	Area Code Daytime Telephone Number		
Mailing Address: Registration Section	Street Address: Registration Section		
Division of Corporations P.O. Box 6327	Division of Corporations 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 DEF ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fe Certificate of	ee & 🔲 \$155.00 Filing Fee & 🖂 \$160.00 Filing Fee, Certificate		

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. DACULA DESIGN GF (Name of Foreign	ROUP LLC Limited Liability Company; must include "Limite	d Liability Compan	iy." "L.L.C.," or "LI.C.")	<u>. </u>
(If name unavailable, enter alternate r	name adopted for the purpose of transacting business in Fl	orida. The alternate n	ame must include "Limited Liabili	ity Company," "E. L. C," or "LJ.C."
GEORGIA		•		
2. (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	(FEI number, i	f applicable)
NONE				
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) ine penalty liability)		
605 NORTH COUNTY	Y HWY 393	SAME	ailing Address)	
(Street Address of Principal Office)	<u></u> -	1,M	ailing Address)	
SUITE 15A				
SANTA ROSA BEAC	H. FL 32459			
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptab	ole)	. 2
Name:	LLOYD L. DELATOUR, JR.			2023 t
Office Address:	137 BASAL STREET			20 ·
	INLET BEACH, FL		32461 . Florida	·
	(City)	 	(Zip code)	_ 3 ₇

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)

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: LLOYD L. DELATOUR, JR.	■Manager	Name: CINDY DELATOUR
□Member	Address: 137 BASAL STREET	□Member	Address: 137 BASAL STREET
□Authorized	INLET BEACH, FL 32461	□Authorized	INLET BEACH, FL 32461
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□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. 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

LLOYD L. DELATOUR. JR.

Typed or printed name of signee

Control Number: 0472597

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

DACULA DESIGN GROUP LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 25200950
Date Inc/Auth/Filed: 12/08/2004
Jurisdiction : Georgia
Print Date : 05/22/2023

Form Number : 211



Brad Rafforsperger

Brad Raffensperger Secretary of State