

M24000007241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

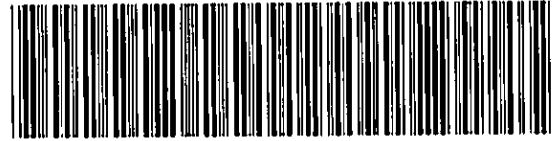
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



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2024 JUN -6 PM 3:25

RECEIVED  
2024 JUN -6 PM 3:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 05 2024

K. Brumbley



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext:

To: Department Of State, Division Of Corporations  
From: Amanda Miller  
Ext:  
Date: 06/06/24  
Order #: 1526263-1  
Re: DIOSS LLC  
Processing Method: Routine

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TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority  
Amount to be deducted from our State Account: \$125.00 - FL State Account Number:  
120000000195  
Certificate of Good Standing from State of Incorporation  
AUTH

Please take the following action:  
File in your office on basis  
Issue Proof of Filing

A handwritten signature in black ink, appearing to read 'Amanda Miller', is written over the word 'AUTH' and extends to the right.

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: DIOSS 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:

Michael Beltran

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

DIOSS LLC

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

1050 E. Flamingo Road S107 1635

\_\_\_\_\_  
Address

Las Vegas, NV 89119

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

mbeltran@diossllc.com

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

For further information concerning this matter, please call:

Michael Beltran

305

209-2953

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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. DIOSS LLC

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

DIOSS, LLC

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

Delaware

87-4297422

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

(FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration )  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

1050 E. Flamingo Road

1050 E. Flamingo Road

5. (Street Address of Principal Office)

6. (Mailing Address)

S107 1635

S107 1635

Las Vegas, NV 89119

Las Vegas, NV 89119

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

32301

(City)

Florida

(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.

Corporation Service Company

By:

(Registered agent's signature)

2024 JUN -6 PM 4:25

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: Michael Beltran

☐ Member                      Address: 1050 E. Flamingo Road

☒ Authorized                      S107 1635

Person                      Las Vegas, NV 89119

☐ Other                      ☐ Other

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

☒ Manager                      Name: Deisell Donahoe

☐ Member                      Address: 1050 E. Flamingo Road

☒ Authorized                      S107 1635

Person                      Las Vegas, NV 89119

☐ Other                      ☐ Other

☒ Manager                      Name: Tim Pierce

☐ Member                      Address: 1050 E. Flamingo Road

☒ Authorized                      S107 1635

Person                      Las Vegas, NV 89119

☐ Other                      ☐ Other

☒ Manager                      Name: Gina Damon

☐ Member                      Address: 1050 E. Flamingo Road

☒ Authorized                      S107 1635

Person                      Las Vegas, NV 89119

☐ Other                      ☐ Other

☒ Manager                      Name: James Donahoe

☐ Member                      Address: 1050 E. Flamingo Road

☒ Authorized                      S107 1635

Person                      Las Vegas, NV 89119

☐ 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

Michael Beltran

\_\_\_\_\_  
Typed or printed name of signee

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "DIOSS 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 FIFTH DAY OF JUNE, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DIOSS LLC" WAS  
FORMED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2021.

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



6320629 8300

SR# 20242784657

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203639464

Date: 06-05-24