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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 : INCORPORATING SERVICES FL  
Account Number : I20050000052  
Phone : (302) 531-0855  
Fax Number : (850) 656-7953

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

Email Address: jwinter@d4discovery.com

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company  
D4 LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,318.75

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B. BOSTICK

MAR - 3 2014

EXAMINER

1/2

**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. D4 LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

D4 LLC of New York  
(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.")

2. New York 3. 16-1532901  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. November 2009  
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)


5. 222 Andrews Street  
Rochester, NY 14604  
(Street Address of Principal Office)

6. Same  
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
John K. Holland, President  
D4 LLC  
222 Andrews Street, Rochester, NY 14604

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8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

  
Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Suzanne Argento  
Typed or printed name of signer

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

**D4 LLC**

If unavailable, the alternate to be used in the state of Florida is:

**D4 LLC of New York**

2. The name and the Florida street address of the registered agent and office are:

**Paracorp Incorporated**

(Name)

**236 East 6th Avenue**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Tallahassee**

**FL 32303**

City/State/Zip

*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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.*

SEE ATTACHED

(Signature)

- \$ 100.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

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 STATE OF FLORIDA  
 TALLAHASSEE  
 211 ED

**STATE OF FLORIDA**

**REGISTERED AGENT CONSENT FORM**

**DATE:** 2/27/2014

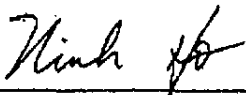
**ENTITY NAME:** D4 LLC

**REGISTERED AGENT NAME AND ADDRESS:**

Paracorp Incorporated  
236 East 6<sup>th</sup> Avenue  
Tallahassee, FL 32303

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STATE OF FLORIDA  
SECRETARY OF STATE

**Paracorp Incorporated**, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

  
\_\_\_\_\_

Ninh Ho, Assistant Secretary  
Paracorp Incorporated

**State of New York  
Department of State } ss:**

I hereby certify, that DOCULEGAL LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/30/1997, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

- A Certificate of Amendment was filed on 10/01/1997.
- An Affidavit of Publication of DOCULEGAL LLC was filed on 10/17/1997.
- An Affidavit of Publication of DOCULEGAL LLC was filed on 10/17/1997.
- A Biennial Statement was filed 07/27/1999.
- A Biennial Statement was filed 07/11/2001.
- A Biennial Statement was filed 05/29/2008.
- A certificate changing name to JTSO HOLDINGS LLC was filed on 06/03/2008.
- A certificate changing name to D4 LLC was filed on 12/30/2008.
- A Biennial Statement was filed 02/24/2010.
- A Biennial Statement was filed 08/12/2011.
- A Biennial Statement was filed 07/30/2013.

I further certify, that no other documents have been filed by such Limited Liability Company.



\*\*\*

Witness my hand and the official seal of the Department of State at the City of Albany, this 20th day of February two thousand and fourteen.

*Anthony Giardina*

Anthony Giardina  
Executive Deputy Secretary of State

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