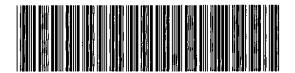


Office Use Only



600287196356

16 JUN 24 AM 8: 27 TO JUN 24 PH 1: 38

JUN 2 7 2016 Y SULKER CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 191527 7100061

AUTHORIZATION: Smellelle

COST LIMIT : \$ 425...00

ORDER DATE: June 23, 2016

ORDER TIME : 8:42 AM

ORDER NO. : 191527-020

CUSTOMER NO: 7100061

FOREIGN FILINGS

NAME: DK MANAGER XV LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO:

Registration Section

Division of Corporat	ions					
DK MANAGER	XV LLC					
JBJECT: Name of Limited Liability Company						
The enclosed "Application by I Existence, and check are submi	Foreign Limited Liability Com itted to register the above refer	pany for Authorization to Tra enced foreign limited liability	ansact Business in Florida," Certificate of y company to transact business in Florida.			
Please return all correspondence	e concerning this matter to the	following:				
****	N	Jame of Person				
	F	irm/Company				
·	innered and the second and the secon	Address	and the second s			
	City/S	State and Zip Code				
	E-mail address: (to be use	d for future annual report no	tification)			
For further information concern	ning this matter, please call:					
Nam	e of Contact Person	at () Area Code Day	ytime Telephone Number			
14ani	e of contact i cison	·	•			
MAILING ADDRESS: Division of Corporations			Γ ADDRESS: of Corporations			
Registration Section			tion Section			
P.O. Box 6327		Clifton Building				
Tallahassee, FL 32314	4		ecutive Center Circle see, FL 32301			
Enclosed is a check for the foll						
□ \$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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable 'enter	alternate name adopted for the purpos	se of transacting husir	ness in Florida. The alter	nate name must incl	ude "Limit	ed
Liability Company," "L.L.C				nato name maje me.	200	
2. DELAWARE		3. APPLIED	FOR			
(Jurisdiction under the la- company is organized)	w of which foreign limited liability		(FEI number, if ap	plicable)		
4.						
	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida, if prior 5.0905, F.S. to determ	to registration.) ine penalty liability)			
5. 3301 BONITA BEA	CH ROAD, SUITE 113		·			
BONITA SPRINGS,	FL 34134					
	(Street Address of	Principal Office)				
6. <u>3301 BONITA BEAC</u>	CH ROAD, SUITE 113					
BONITA SPRINGS,						
	(Mailing	Address)				
7. Name and street addr	ess of Florida registered agent: (P	O. Box NOT acce	eptable) .	至	ਿਲ	
Name:	Corporation Service Compan	У	Tiniux	راً المراقبة المراقبة) IN	-
Office Address:	1201 Hays Street		******	38	N 2	de effekter Speciestie (No
	Tallahassee		, Florida <u>32301</u>			;
Registered agent's acce	(City)		(Zip c	xode)	~ asc -⁄ co	ļ
	registered agent and to accept ser	vice of process for	the above stated corp	oration at the pla	ce designa	ted in
riaving been named as i				city. I further:ap		
this application, I hereb	y accept the appointment as regis				with and	iccepi
this application, I hereb with the provisions of al	ll statutes relative to the proper an				with and c	•
this application, I hereb with the provisions of al	Il statutes relative to the proper an osition as registered agent. Corporation Service Compan	nd complete perfor				
this application, I hereb with the provisions of al	It statutes relative to the proper an osition as registered agent. Corporation Service Compan By:	nd complete perfor	mance of my duties, a	ind I am fumiliar	Williar	ns
this application, I hereb with the provisions of al the obligations of my po	It statutes relative to the proper an estition as registered agent. Corporation Service Compan By: (Registered)	nd complete perform	mance of my duties, a	ond I am familiar Courtney Asst. Vice	Williar	ns
this application, I hereb with the provisions of al the obligations of my po 8. The name, title or ca	It statutes relative to the proper an osition as registered agent. Corporation Service Compan By: (Regist pacity and address of the person(s)	nd complete perform tered agent's signatur) who has/have auth	mance of my duties, a e) nority to manage is/are	ond I am familiar Courtney Asst. Vice	Williar	ns
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this application, I herebwith the provisions of all the obligations of my post. 8. The name, title or carricular and HUTCHINS THOMAS HARRISON 9. Attached is a certification under the law	It statutes relative to the proper and esition as registered agent. Corporation Service Companings: (Registered agent) (Registe	tered agent's signatur) who has/have auth CH RD., SUITE 113, Bo ays old, duly auther	mance of my duties, and the control of my duties and the control of my duties, and the control of my duties are control of my duties and the control of my duties and the control of my duties and the control of my duties are control of my duties and the control of my duties are control of my duties and the control of my duties are control of my duties and the control of my duties are control of my duties are control of my duties and the control of my duties are control	Courtney Asst. Vice S, FL 34134 having custody of	Williar Presid	ns ent

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.)

JOY S. GOLDMAN

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DK MANAGER XV 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 TWENTY-FOURTH DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DK MANAGER XV LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TA HAVE BEEN ASSESSED TO DATE.

Authentication: 202553007

Date: 06-24-16

6077706 8300

SR# 20164632731

You may verify this certificate online at corp.delaware.gov/authver.shtml