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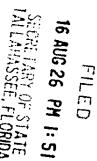
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COVER LETTER

TO:		ion Section of Corporations	i				
SUBJI		Cephyrhills, LLC					
			Name of I	Limited Liability C	Company		
The en Exister	closed "App nce, and che	olication by Fore ck are submitted	ign Limited Liability Comp to register the above refere	any for Authoriza enced foreign limit	tion to Tra ed liability	insact Business in Florida," Certify company to transact business in	icate of Florida.
Please	return all co	orrespondence co	oncerning this matter to the	following:			
		Suzanne P. Suth	erland				
	•		N	ame of Person			
		Hilger Hammon	d, PC				
Firm/Company							
	49 Monroe Center NW, Suite 200						
Address							
	Grand Rapids, MI 49503						
	•		City/S	tate and Zip Code			
	р	duthler@yahoo.e	com				
			E-mail address: (to be used	for future annual	report not	ification)	
For fur	ther inform	ation concerning	this matter, please call:				
	Suzame	Sutherland		616 at (458-36	00	
		Name of	Contact Person	Area Code	Day	rtime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
Enclos		k for the followi 10 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Certifica of Status & Certified Copy	ate

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 LUMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: DGZephyrhills, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.") 2 Michigan (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 634 Front Street NW, Suite 400 Grand Rapids, MI 49504 (Street Address of Principal Office) 634 Front Street NW, Suite 400 Grand Rapids, MI 49504 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) 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 [T] designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity-I Jurthe merec to complywith the provisions of all statutes relative to the proper and competentian level and the provisions of all statutes relative to the proper and competential and the provisions of all statutes relative to the proper and competential and the provisions of all statutes relative to the proper and competential and the provisions of all statutes relative to the proper and competential and the provisions of all statutes relative to the proper and competential and the provisions of all statutes relative to the proper and competential and the provisions of all statutes relative to the proper and competential and accept the obligations of my position as registered agent. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Patricia S. Duthler, Manager 2737 North 11th Street Arlington, VA 22201 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) Signature of an authorized person

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.

Typed or printed name of signed

Patricia S. Duthler



Lansing, Michigan

This is to Certify That

DGZEPHYRHILLS, LLC

was validly organized on August 8, 2016 as a Limited Liability Company. Said Limited

Liability Company is validly in existence under the laws of this state and has satisfied its annual filing oblight

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1407007 In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 19th day of August, 2016

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau