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COVER LETTER

TO:

Registration Section -

CT: _	OLP Capital Advis		Limited Liability C	ompany				
osed "	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida,"							
					y company to transact business i			
turn a	Il correspondence	concerning this matter to the	following:					
	Barry W. DeG	root						
	- · · · · · · · · · · · · · · · · · · ·	N	ame of Person					
	DLP Capital A	dvisors, LLC						
	Firm/Company							
	701 West Broa	ad Street						
	Address							
	Bethlehem PA	18018						
		City/S	tate and Zip Code					
	barry@dreamliv	eprosper.com						
		E-mail address: (to be use	d for future annual i	report not	tification)			
er info	ormation concerning	ng this matter, please call:						
Barry	y W. DeGroot		215	589-51	02			
	Name	of Contact Person	at (Area Code	Day	rtime Telephone Number			
MAILING ADDRESS:				ADDRESS:				
	Division of Corporations Registration Section		Division of Corporations Registration Section					
P.O. I	Box 6327			Clifton B	uilding			
Tallai	hassee, FL 32314				ecutive Center Circle see, FL 32301			
isac	heck for the follow	ving amount:						
	25.00 Filing Fee	☐ \$130.00 Filing Fee &	□ \$155.00 Filing		□ \$160.00 Filing Fee, Certific			

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:

(Name of Fore	ign Limited Liability Company; must in	nclude "Limited Liability Company," "L.L.C.," or	r"LLC.")		
If name unavailable, enter al Liability Company," "L.L.C,"		f transacting business in Florida. The alternate nat	me must inc	lude "L	imited
Pennsylvania	,	3. 46-1208412			
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if application under the law of which foreign limited liability company is organized)					
	(Date first transacted business i	in Florida, if prior to registration.) 05, F.S. to determine penalty liability)			
701 West Broad Street		05, r.s. to determine penany habitity)	<u></u>		
Bethlehem PA 18018					
	(Street Address of Prin	ncipal Office)			
701 West Broad Street	·	·		=	
•				2	
Bethlehem PA 18018			_	Y	
	(Mailing Add	dress)		2	`
. Name and street addres	s of Florida registered agent: (P.O.	Box NOT acceptable)	N _S	PM	المنا
Name:	Don Wenner Home Selling, Inc.				Ú
Office Address:	1501 Ridgewood Ave #217			=	
	Daytona Beach	, Florida ³²¹¹⁷			
	(City)	(Zip code)			
esignated in this applicate complywith the provision	tion, I hereby accept the appointme	e of process for the above stated limited liab ent as registered agent and agree to act in th oper and complete performance of my dutie	his capacity	. I fu	rther a
	(Registered	ed agent's signature)			
	voits, and address of the negon(s) sub	ho has/have authority to manage is/are:			
The name, title or capa	icity and address of the personest wi	no nas navo autro ny to manago isvaro.			
•	•	no has have dulionly to manage is are.			
Donald Wenner, Managin	g Member	no has have dudionly to manage is ale.			
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Donald Wenner, Managin 701 West Broad Street Be 2. Attached is a certificate urisdiction under the law	of existence, no more than 90 days of which it is organized. (If the certification)	old, duly authenticated by the official having ificate is in a foreign language, a translation of	g custody of	f recor icate u	ds in th
Donald Wenner, Managin 701 West Broad Street Be 2. Attached is a certificate urisdiction under the law	of existence, no more than 90 days of which it is organized. (If the certification)	old, duly authenticated by the official having	g custody of	f recor icate u	ds in tl inder o
Donald Wenner, Managin 701 West Broad Street Be O. Attached is a certificate urisdiction under the law of the translator must be su	of existence, no more than 90 days of which it is organized. (If the certification of the cer	old, duly authenticated by the official having ificate is in a foreign language, a translation of	of the certif	icate u	inder o

Donald Wenner

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

10/25/2016

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TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

DLP Capital Advisors, LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC161025100553-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx