

m17000001446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

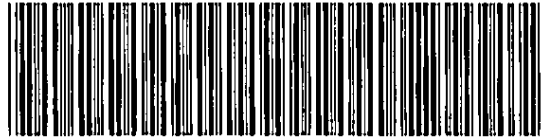
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

cert w17-7128
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SECRETARY OF STATE
OF AMHERST, FLORIDA

FILED

S Warren

FEB 20 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2017

JEANNINE STONE
MORRIS J. COHEN & CO
1601 MARKET ST, SUITE 2525
PHILADELPHIA, PA 19103

SUBJECT: D & K GP LLC
Ref. Number: W17000007128

We have received your document for D & K GP LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 117A00001603



MORRIS J. COHEN & CO., P.C.

CERTIFIED PUBLIC ACCOUNTANTS

1601 Market Street
Suite 2525
Philadelphia, PA 19103-2301
215-567-8000
New York: 212-283-7400
Fax: 215-567-5288
www.micco.com

February 6, 2017

Florida Division of Corporations
Attention: Stacey M Warren
P.O. Box 6327
Tallahassee, FL 32314

Re: D&K GP, LLC
Ref #W17000007128
Letter #117A00001603

Dear Ms. Warren,

We are the accountants for the above named taxpayers and are in receipt of your letter dated January 25th, 2017(copy enclosed). We have attached the requested documents:

- Updated Florida Foreign Entity Business Application
- Authenticated Delaware Certificate of Good Standing

Please contact me at (215) 567-8000 X204 if you have any questions or need more information.

Sincerely,

Jeannine Stone, CPA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: D&K GP, 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:

JEANNINE STONE

Name of Person

MORRIS J. COHEN & CO

Firm/Company

1601 MARKET ST, SUITE 2525

Address

PHILADELPHIA, PA 19103

City/State and Zip Code

JSTONE@MJCCO.COM

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

For further information concerning this matter, please call:

JEANNINE STONE

215
at ()

567-8000

Name of Contact Person

Area Code

Daytime 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

Enclosed is a check for the following amount:

☒ \$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. D&K GP, 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. DELAWARE 3. 26-0841862
(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)

5. 10031 WEST BROADVIEW RD
BAY HARBOR ISLANDS, FL 33154
(Street Address of Principal Office)

6. SAME AS PRINCIPAL OFFICE

(Mailing Address)

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

Name: Sagi Genger
Office Address: 10031 West Broadview Rd.
Bay Harbor Islands, Florida 33154
(City) (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.

[Signature]
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

SAGI GENDER - PRESIDENT
10031 WEST BROADVIEW RD
BAY HARBOR ISLANDS, FL 33154

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]
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.

SAGI GENDER
Typed or printed name of signee

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STATE OF FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "D & K GP 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 FIRST DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "D & K GP LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF OCTOBER, A.D. 2004.

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

3870803 8300

SR# 20170589977

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

Authentication: 201969214

Date: 02-01-17