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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694~8107 Phone : (561)694-1639 Fax Number

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FOREIGN PROFIT/NONPROFIT CORPORATION

DFW Management Corporation

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Delaware (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpetual) (Date of principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: (Corporate Creations Network, Inc. 801 US Highway 1 North Pulm Beach (City) Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation in the place in the application, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete performance of my durated I am familiar with and accept the obligations of my position as registered agent. Saray Djidji, Special Secretary	Di vi ivianageme	nt Corporation			
(State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 300 Frank W. Burr Blvd., 7th Floor, Glenpointe Centre East, Teaneck, NJ 07666 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Soli US Highway 1 North Palm Beach (City) North Palm Beach (City) Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the places as a segment of the provisions of all statutes relative to the proper and complete performance of my durated and I am familiar with and accept the obligations of my position as registered agent.	(Enter name of co		"COMPANY," "CORPORATION,"		
(Date of incorporation) (Date of duration, if other than perpetual)	(If name unavaila	ble in Florida, enter alternate comporate name ad	opted for the purpose of transacting bu	isiness in Florida)	
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^{10.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS				
Keith Pennell		☐ Chairman	Name: DFW Capital Partners Address:	
		□Vice Chairman		
■ Director	300 Frank W. Burr Blvd., 7th Floor	■ Director ☐ President	300 Frank W. Burr Blvd, 7th Floor Glenpointe Centre East	
President	Glenpointe Centre East			
□Vice President	Teaneck, NJ 07666	■ Vice President	Teaneck, NJ 07666	
☐Secretary	☐Treasurer	□ Secretary	□Treasurer	
□Other	Other	□Other	□Other	
□ Chairman	Name:	□ Chairman	Brian Tilley Name:	
□Vice Chairman	DFW Capital Partners Address:	□ Vice Chairman	DFW Capital Partners Address:	
■ Director	4445 Willard Avenue, 11th Floor	Director	4445 Willard Avenue, 11th Floor	
☐President	Chevy Chase, MD 20815	□President	Chevy Chase, MD 20815	
_,		□ Vice President		
Secretary	Treasurer	Secretary	☐ Treasurer	
Other		Other	□Other	
□Chairman	Name:	□ Chairman	Name:	
□Vice Chainnan	Address:	☐ Vice Chairman	Address:	
□ Director		Director		
□President		☐ President		
□Vice President	and the state of t	□Vice President		
☐Secretary	□Treasurer	Secretary	☐ Treasurer	
Other	Other	□Other	Other	
Important Notice: individuals may b	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep	e attachment will be image artment of State Annual R	od for reporting purposes only. Non-indexed eport form.	
12.	/			
The officer or dip	Signature of Director signing this document (and who is listed in n false information submitted in a document to the D	umber 11 above) affirms ti	hat the facts stated herein are true and that he of	



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DFW MANAGEMENT CORPORATION" IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DFW MANAGEMENT CORPORATION" WAS INCORPORATED ON THE FIFTEENTH DAY OF JUNE, A.D. 1994.

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

Authentication: 203507040

Date: 08-20-20