M110000004118

(Requestor's Name)		
(Address)		
(Address)		
(· · ·	,	
(0)		(b)
(City/s	State/Zip/Phon	e#)
PICK-UP	WAIT WAIT	MAIL
(Busin	ness Entity Na	me)
(2-3-3)	,	,
(Docu	ment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer	
Special Instructions to Filing Officer:		
	,	





500210823705

08/16/11--01010--012 **125.00

III AUG 16 PH 3: 09

B. BOSTICK
'AUG 17'2011
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	CT: DR Capital Managers,	LLC.		
		e 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 mat	tter to the following:		
	Carlos E. Gomez			
		Name of Person		
	DR Capital Managers, LLC	· >		
		Firm/Company		
	799 Crandon Blvd, Unit 9			
		Address		
	Key Biscayne, Florida 33	149		
		City/State and Zip Code		
	carlos.gomez@palmfu	ind.com		
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
	Carlos E. Gomez	at (917) 488-9254 😴		
	Name of Person	Area Code & Daytime Telephone Number		
	MAILING ADDRESS:	STREET ADDRESS:	e T	
	Division of Corporations	Division of Corporations	PT-receive	
	Registration Section P.O. Box 6327	Registration Section Scient Section Clifton Building Section S	- t	
	Tallahassee, FL 32314	2661 Executive Center Circle		
	1 111011110500, 1 2 32311	Tallahassee, FL 32301	CO MICHAEL	
그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그				
	Enclosed is a check for the following amount: [] \$125.00 Filing Fee			
ŀ	\$125.00 Filing Fee \$\bigcup \text{\$\frac{1}{3}0.00 \text{Filing Fee & Certificate}}\$\bigcup \text{\$\frac{1}{3}155.00 \text{Filing Fee & Fee & Filing Fee, Certificate}}\$\bigcup \text{\$\frac{1}{3}160.00 \text{ Filing Fee, Certificate}}\$\bigcup \text{\$\frac{1}{3}160.			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. DR Capital Managers, LLC. (Name of Foreign Limited Liability Company; must incl	lude "Limited Liability Company," "L.L.C.," or "LLC.")
	ose of transacting business in Florida and attach a copy of the writte ternate name. The alternate name must include "Limited Liability
Delaware (Jurisdiction under the law of which foreign limited liability company is organized)	3. 26-0170652 (FEI number, if applicable)
4. August 2, 2006 (Date of Organization)	5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. August 1, 2011 (Date first transacted business in F (See sections 608.501 & 608.502 F.)	lorida, if prior to registration.) S. to determine penalty liability)
7. 799 Crandon Blvd, Unit 905	TALL!
Key Biscayne, Florida 33149 (Street Addres	s of Principal Office)
8. If limited liability company is a manager-manage	d company, check here
The name and usual business addresses of the mar Carlos E. Gomez	naging members or managers are as follows:
799 Crandon Blvd, Unit 905	
Key Biscayne, Florida 33149	
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under oath of the translator must be suf	
11. Nature of business or purposes to be conducted of	or promoted in Florida: Investment Management
× My	
(In accordance with section 608.408(3), F.S., the exceptable of perjury that the facts stated herein are to	nuthorized representative of a member. continue of this document constitutes an affirmation under the true. I am aware that any false information submitted in a less a third degree felony as provided for in s.817.155, F.S.)
Carlos E. Gomez	

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
DR Capital Managers, LLC.	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and	office are:
Carlos E. Gomez	TAL
(Name)	AUG
799 Crandon Blvd, Unit 905	ASS 5
Florida Street Address (P.O. Box NOT ACCEPTAN	
Key Biscayne, FL 33149	A 3: 09 FLORID
City/State/Zip	9 DA

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "DR CAPITAL MANAGERS 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 AUGUST, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DR CAPITAL MANAGERS LLC" WAS FORMED ON THE SECOND DAY OF AUGUST, A.D. 2006.

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

11 AUG 16 PH 3: 09

4199250 8300

110877380

AUTHENT CATION: 8940094

DATE: 08-01-11

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