M 14 00 0003847

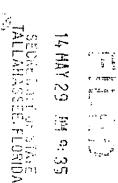
| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| , |
| Certified Copies Certificates of Status |
| |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



600260552636

05/29/14--01020--006 **130.00



COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: PBPDQ NORTHLAKE 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: |
| Sheryl Fisher |
| Name of Person |
| Palm Beach PDQ |
| Firm/Company |
| 777 S Flagler Dr, Ste 136E |
| West Palm Beach, FL 33401 |
| City/State and Zip Code |
| sherylf@pdqpb.com |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Sheryl Fisher561623-1241 |
| 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: \$\Bigsize \text{\$125.00 Filing Fee}\$ \Bigsize \$\$\$\$\$\$\$\$\$\$ \$130.00 Filing Fee & Certificate of Status \$ |

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. PBPDQ NORTHLAKE LLC | |
|--|---|
| (Name of Foreign Limited Liability Company; must in | nclude "Limited Liability Company," "L.L.C.," or "LLC.") |
| (If name unavailable, enter alternate name adopted for the purpose of Liability Company," "L.L.C," or "LLC.") | of transacting business in Florida. The alternate name must include "Limited |
| _{2.} Delaware | _{3.} 61-1737352 |
| (Jurisdiction under the law of which foreign limited liability company is organized) | (FEI number, if applicable) |
| 4. upon filing of this transaction | |
| (Date first transacted business (See sections 605.0904 & 605.09 | in Florida, if prior to registration.) 05, F.S. to determine penalty liability) |
| _{5.} 777 S Flagler Dr, Suite 136E | Mel |
| West Palm Beach, FL 33401 | |
| Same as above | ress of Principal Office) |
| (Ma | ailing Address) |
| 7. The name, title or capacity and address of the pe | erson(s) who has/have authority to manage is/are: |
| Palm Beach PDQ Holdings II LLC | MGK EST |
| | Si N ins |
| | |
| | |
| having custody of records in the jurisdiction under | the law of which it is organized. (A photocopy is not a translation of the certificate under oath of the translator |
| Signature of Signature of this document of the section of this document of the section of the se | f an authorized person |

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| If unavailable, the alternate to be used in the state of Florida is: | | | | |
|--|-----------------------------------|--|----------|--|
| 2. The name | and the Florida street address of | f the registered agent and office are: | | |
| | Sheryl Fisher | | | |
| | | (Name) | _ | |
| | 777 S Flagler Dr | , Ste 136E | | |
| | Florida Street Addre | ess (P.O. Box NOT ACCEPTABLE) | | |
| | West Palm Beach | _{FL} 33401 | | |
| | | City/State/Zip | - | |
| | | City/butto/Eip | | |

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Sheyl Fisher (Signa

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "PBPDQ NORTHLAKE, 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 THIRTEENTH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PBPDQ"

NORTHLAKE, LLC" WAS FORMED ON THE THIRTEENTH DAY OF MAY, A.D.

2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

TALLAHASSEE FLORIDA

5533109 8300

140622158

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 1369276

DATE: 05-13-14

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