Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842

Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company DG DMV, LLC

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Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu



COVER LETTER

TO: Re	gistration Section		
	vision of Corporations		
	DG DMV, LLC		
SUBJECT:	DO DITT, ELEC	Name of Limited Liability Company	
		* , ,	
The enclosed Existence, a	d "Application by Foreig and check are submitted to	n Limited Liability Company for Authorization to Transact Business in Florida," Certific register the above referenced foreign limited liability company to transact business in	icate of Florida.
Picase return	л all correspondence conc	cerning this matter to the following:	
	Burton Kaiz		
		Name of Person	
		Firm/Company	
	5700 La Gorce Driv	ve	
		Address	
	Miami Beach, FL 3	3140	
		City/State and Zip Code	
	dede@dragonglobal	.com	
		E-mail address: (to be used for future annual report notification)	
For further i	information concerning th	is matter, please calf:	
	-	•	
De	ede Loftus	at (650) 533-3213	
	Name of C	at (650) 533-3213 ontact Person Area Code Daytime Telephone Number	
M/	AILING ADDRESS:	STREET ADDRESS:	
Div	vision of Corporations	Division of Corporations	
	gistration Section	Registration Section	
	D. Box 6327 Nahassee, FL 32314	Clifton Building	
(4.1	nandsee, FL 323 (4	2661 Executive Center Circle Talluhessee, FL 32301	
Enclosed i	is a check for the foll	owing amount:	
		S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certified Copy	ite

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:

f name unevailable, enter alternate name adopted for the purpose of transacting business iability Company," "LLC," or "LLC.")	in Florida. The alternate name must include "L	imite
Delaware 3 47-4143303		
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
Has not Begun		
(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registration.)	
(and another than a section of the s	pointly Hability)	
		رن ب
5700 La Gorce Drive, Miami Beach, FL 33140		C
(Street Address of Principal Office	n Section 2	ا <u>. </u>
•) M	*3"
5700 La Gorce Drive, Miami Beach, FL 33140	[7] .nn	
	L. O	
(Mailing Address)	<u> </u>	<u>ن</u> در
. The name, title or capacity and address of the person(s) who has	/have authority to manage is/are:	
	/have authority to manage is/are:	_
	/have authority to manage is/are:	
	/have authority to manage is/are:	-
lurton Katz Manager - 5700 La Gorce Drive, Miami Beach, FL 33140	/have authority to manage is/are:	
ourton Katz Manager - 5700 La Gorce Drive, Miami Beach, FL 33140 Attached is an original certificate of existence, no more than 90 d.	have authority to manage is/are:	 ffic
urton Katz Manager - 5700 La Gorce Drive, Miami Beach, FL 33140 Attached is an original certificate of existence, no more than 90 daying custody of records in the jurisdiction under the law of which	have authority to manage is/are: ays old, duly authenticated by the oit is organized. (A photocopy is not	ľ
Attached is an original certificate of existence, no more than 90 d aving custody of records in the jurisdiction under the law of which ecceptable. If the certificate is in a foreign language, a translation of	have authority to manage is/are: ays old, duly authenticated by the oit is organized. (A photocopy is not	ľ
Attached is an original certificate of existence, no more than 90 d aving custody of records in the jurisdiction under the law of which ecceptable. If the certificate is in a foreign language, a translation of	have authority to manage is/are: ays old, duly authenticated by the oit is organized. (A photocopy is not	ľ
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Attached is an original certificate of existence, no more than 90 d aving custody of records in the jurisdiction under the law of which ecceptable. If the certificate is in a foreign language, a translation of nust be submitted) Signature of an authorized processors with section 605.0203, F.S., the execution of this document constitutes an offirmation	have authority to manage is/are: ays old, duly authenticated by the o it is organized. (A photocopy is not the certificate under oath of the trai	t nsla
7. The name, title or capacity and address of the person(s) who has Burton Katz Manager - 5700 La Gorce Drive, Miami Beach, FL 33140 3. Attached is an original certificate of existence, no more than 90 deaving custody of records in the jurisdiction under the law of which acceptable. If the certificate is in a foreign language, a translation of must be submitted) Signature of an authorized processor of this document constitutes an affirmation in aware that any false information submitted in a document to the Department of State constitutes at Dette Loftus Typed or printed name of signal and the printed of the printed name of signal and the printed printed that any false information submitted in a document to the Department of State constitutes at Dette Loftus	have authority to manage is/are: ays old, duly authenticated by the o it is organized. (A photocopy is not the certificate under oath of the trai	t nsle

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.

f unavailab	le, the alternate to be used in the	state of Florida is:	
			741 24 C
. The nam	e and the Florida street address	of the registered agent and office are:	Teach.
	CT Corporation System		7434 A
		(Name)	
	1200 South Pine Island Road		222
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		> 2>
	Plantation	FL 33324	
		City/State/Zip	
		to accept service of process for the above st this certificate, I hereby accept the appointn	nent as

\$ 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 "DG DMV, 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 FOURTH DAY OF JUNE, A.D. 2015.

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

15 JUN - 4 PH 1: 58

5626071 8300

150880404

You may vorify this cortificate online at corp. dalaware. gov/authver.shtml

jeffrey W. Bullack, Secretary of State

AUTHENTICATION: 2437692

DATE: 06-04-15