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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
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2015 JUN 26 AM 9: 20 SECRETARY OF STATE LATE ANASSEE, PLURBLA

FILED

DEPARTMENT OF STATE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 679567 7100061

AUTHORIZATION : Spelle Remain

COST LIMIT : \$'125'.00

ORDER DATE: June 23, 2015

ORDER TIME : 3:20 PM

ORDER NO. : 679567-010

CUSTOMER NO: 7100061

FOREIGN FILINGS

NAME: DISCOVERY NAPLES EMPLOYER LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

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:

	LES EMPLOYER LLC oreign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter	r alternate name adopted for the purpose of transa	cting business in Florida. The alternate name must include "Limited
Liability Company," "L.L.		DDI VOD GOD
2. DELAWARE	3. An w of which foreign limited liability	PPLIED FOR (FEI number, if applicable)
company is organized)	w of which foreign limited hability	(FEI number, if applicable)
4.		
***************************************	(Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S	da, if prior to registration.)
- 3301 BONITA REA	CH ROAD, SUITE 113	. to determine penalty hadring)
5		<u> </u>
BONITA SPRINGS.	. FL 34134	
	(Street Address of Principal C	Office)
6. 3301 BONITA BEAG	CH ROAD, SUITE 113	
BONITA SPRINGS,		71 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
BUNITA SPRINGS,	(Mailing Address)	Market 1
		المستراكين
Name and <u>street addr</u>	ess of Florida registered agent: (P.O. Box 1	NOT acceptable)
Name:	Corporation Service Company	
Office Address:	1201 Hays Street	We delicate and a second secon
	Tallahassee (City)	, Florida32301
		(Zip code)
Registered agent's acce Having been named as i		ocess for the above stated corporation at the place designated in
this application, I hereb	y accept the appointment as registered ager	nt and agree to act in this capacity. I further agree to comply
with the provisions of al	ratations are accepted and off and accept	te performance of my duties, and I am familiar with and accept
ne oouguuons oj my po	Corporation Service Company	Courtney Williams
	DV:	Asst_Vice President
	(Registeled agent	s signature)
8. The name, title or cap	pacity and address of the person(s) who has/	have authority to manage is/are:
	ON, 3301 BONITA BEACH RD., SUITE I	
		· ************************************
THOMAS HARRISON,	, 3301 BONITA BEACH RD., SUITE 113, I	
	ed persons: MANAGER	
Title for both liste	ed persons: MANAGER c of existence, no more than 90 days old, du v of which it is organized. (If the certificate i submitted)	ly authenticated by the official having custody of records in the s in a foreign language, a translation of the certificate under oath
Title for both liste O. Attached is a certificat urisdiction under the law	ed persons: MANAGER c of existence, no more than 90 days old, du v of which it is organized. (If the certificate i submitted)	s in a foreign language, a translation of the certificate under oath
Title for both liste O. Attached is a certificat urisdiction under the law	ed persons: MANAGER c of existence, no more than 90 days old, du v of which it is organized. (If the certificate i submitted)	s in a foreign language, a translation of the certificate under oath
Title for both listed. Attached is a certificate urisdiction under the law of the translator must be	ed persons: MANAGER c of existence, no more than 90 days old, du v of which it is organized. (If the certificate i submitted) Signature of an author	s in a foreign language, a translation of the certificate under oath

Typed or printed name of signce

JOY S. GOLDMAN

Delaware

PAGE :

The First State

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

DELAWARE, DO HEREBY CERTIFY "DISCOVERY NAPLES EMPLOYER 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 TWENTY-THIRD DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DISCOVERY NAPLES EMPLOYER LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JUNE, A.D. 2015.

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

5772137 8300

150960289

AUTHENTICATION: 2493321

DATE: 06-23-15

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