(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 869638 7977587					
AUTHORIZATION: Spullelena					
COST LIMIT : \$ 125.00					
ORDER DATE: November 12, 2015					
ORDER TIME : 1:07 PM					
ORDER NO. : 869638-001					
CUSTOMER NO: 7977587					
FOREIGN FILINGS					
NAME: SW112DG, LLC					
XXXX QUALIFICATION (TYPE: <u>LL</u> )					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING					

EXAMINER:

CONTACT PERSON: Melissa Zender -- EXT# 62956

#### **COVER LETTER**

	SW112DG, LLC				
SUBJECT	•				
_		e of Limited Liability Company			
		ility Company for Authorization to Transact Business in Florida," Certificate of cove referenced foreign limited liability company to transact business in Florida.			
Please retu	urn all correspondence concerning this ma	tter to the following:			
	Eric Milne As President				
	· · · · · · · · · · · · · · · · · · ·	Name of Person			
	SW112DG, LLC				
	Firm/Company				
	444 Brickell Avenue STE	900			
	Address				
	MIAMI FL 33131				
		City/State and Zip Code			
	eadcollc@yahoo.com				
	E-mail address:	(to be used for future annual report notification)			
For further	r information concerning this matter, pleas	se call:			
	Eric Milne As President	305 814-4040			
	Name of Contact Person	at ()  Area Code Daytime Telephone Number			
R P	AILING ADDRESS: Division of Corporations egistration Section O. Box 6327 fallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	l is a check for the following amou 1 \$125.00 Filing Fee \$130.00 Filing Certificate of	g Fee & \$\Bigcup \$155.00 Filing Fee & \$\Bigcup \$160.00 Filing Fee, Certificate			

### 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: SW112DG, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 444 Brickell Avenue Suite 900 Miami, FL, US, 33131 (Street Address of Principal Office) 444 Brickell Avenue Suite 900 Miami, FL, US, 33131 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ai ERIC MILNE, MANAGER, 444 BRICKELL AVENUE STE 900 MIAMI FL 33131. 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Eric Milne, Manager

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.

1. The name SW112DG, LL	of the Limited Liability ( _C	Company is:	
If unavailable	e, the alternate to be used	in the state of Florida is:	
2. The name	and the Florida street add	ress of the registered agent and office a	re:
	Corporation Service Co	mpany	
		(Name)	
	1201 Hays Street		15 Z
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	NOV 13
	Tallahassee	32301 FL	
		City/State/Zip	FLORIB
liability comp registered ago statutes relati	oany at the place designate ent and agree to act in this ing to the proper and comp	and to accept service of process for the d in this certificate. I hereby accept the d capacity. I further agree to comply with plete performance of my duties, and I am registered agent as provided for in Chapa	appointment as h the provisions of all familiar with and
	Corporation Service Com By:	1 to Mark	ssa Zender ce President
	\$ 2	0.00 Filing Fee for Application 5.00 Designation of Registered Ager 0.00 Certified Copy (optional)	

\$ 5.00 Certificate of Status (optional)

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SW112DG, 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 NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SW112DG, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JANUARY, A.D. 2014.

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

Authentication: 10416750

Date: 11-13-15

5468343 8300 SR# 20150905896