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Foreign Limited Liability Company DVCO DELAWARE PARTNERS, LLC

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SUBJECT: DV	C() Delaware Partners, LL	\boldsymbol{c}			
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The enclosed "Application Existence, and check are	on by Foreign Limited Liability C aubmitted to register the above r	Company for Author referenced foreign li	ization to 'i mited liabil	Fransaut Business in Flor lity company to transact l	ids," Certificate of husiness in Florida
Please return all correspo	ndence concorning this matter to	the following:			
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MAILING ADDRI Division of Corpora Registration Section P.O. Box 6327 Tallahassee, FL 323	tions		Division Registrat Clifton E 2661 Exc	TADDRESS: of Corporations tion Section Building ecutive Conter Circle see, PL 32301	
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

DVCO Delaware P	SNESS IN THE STATE OF FLORIDA: Partners, LLC Ign Limited Liability Company; must include "Li	mited Liability Company," "L.L.C.," or "LI	.C.")				
(If name unavailable, enter al	ternate name adopted for the purpose of transactin	· · ·		mited			
Liability Company," "L.L.C."		47-5149000					
4.	laware of which foreign limited liability	(PEI number, if applicable)		-			
company is organized)		fr me transment at all humana					
4	Upon filing						
5	(Date first transauled business in Florida, (See sections 605.0904 & 605.0905, F.S. to 18238 River Oaks Dr.	if prior to registration.) determine pensity liability)					
***************************************	Jupiter, FL 33458						
	(Street Address of Principal Offic	c)		증			
6.	P.O. Box 845			• •			
	Jupiter, FL 33468		21 TAS	5	7		
· · · · · · · · · · · · · · · · · · ·	(Mailing Address)			1			
7. Name and street address	s of Florida registered agent: (P.O. Box NO	l'accentable)		Ġ) Fri		
Name:	Gary Lesnik			-	Į,		
Office Address:	2454 Poinciana Ct		夏至	⋾			
	Weston	Florida 33327	E Fill	2:			
Registered agent's accept	(City)	(Zip code)	#1°				
designated in this applicat to complywith the provisio accept the obligations of n	istered agent and to accept zervice of procession, I hereby accept the appointment as registered to the proper and cay position as registered agent. (Registered agent's s)	stered agent and agree to act in this cap omplete performance of my duties, and primes	ecity. I furth	er agree	: nd		
8. The name, title or cape. Gary Lesnik, Manage	rity and address of the person(s) who has/bave er	sauthority to manage is/are:					
2454 Poinciana Ct			-				
Weston	, Florida 33327						
jurisdiction under the law o of the manslator must be sul - This document is executed i	Signature of an authorize in accordance with section 605.0203 (1) (b), F the Department of State constitutes a third deg	a foreign languago, a translation of the c d person lorida Statutes. I are aware that any false	ertificate undo	n the r oath			
-	Gary Lesnik		1				
	Typed or printed name of	H griess	i				

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Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DVCO DELAWARE PARTNERS, 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 FEBRUARY, A.D. 2016.

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

5809097 8300 SR# 20160603805

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

Authentication: 201782178

Date: 02-04-16