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Division of Corporations

Division of Corporations Fax Number : (850)617-6383 processing the LP registration for fax audit# H17000094790

From:

: C T CORPORATION SYSTEM

Account Name Account Number: FCA0000000023

Phone

: (614)280-3338

Fax Number : (954)208-0845

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

Foreign Limited Liability Company

ADK SPECIAL OPPORTUNITIES GP, LLC

Certificate of Status	0
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COVER LETTER

TO:	Registration Section Division of Corporations	
	ADK Special Opportunities GP, LLC	
SUBJI	Name of Limited Liability Company	
The en Exister	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Plorida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.	
Please	turn all correspondence concerning this matter to the following:	
	Micah J. Feitz	
	Name of Person	
	ADKCapital, LLC	
	Firm/Company	
	350LincolnRoad,2ndFloor	
	Address (A)	
	MiamiBeach, Florida 33139	
	City/State and Zip Code	1.
	micah@adkcapital.com & jamie@adkcapital.com	; ;
	E-mail address: (to be used for future annual report notification)	C
For fu	City/State and Zip Code micah@adkcapital.com & jamie@adkcapital.com E-mail address: (to be used for future annual report notification) et information concerning this matter, please call.	1
	Micah J. Fertz at (786) 322-2075	iii'
	Name of Contact Person Area Code Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Taltabassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Taltabassee, FL 32301	
Enclos	l is a check for the following amount: \$\Pi \text{S125.00 Filing Fee} \text{ \$\Pi \text{\$130.00 Filing Fee & Certificate of Status} \text{ \$\Pi \text{S155.00 Filing Fee & Certified Copy} \text{ \$\Pi \text{\$160.00 Filing Fee, Certified Copy} } \text{ \$\Pi \text{\$\Pi \text{\$160.00 Filing Fee, Certified Copy} } \$\Pi \text{\$\Pi \text{\$\exitty \$\exitt{\$\Pi \text{\$\Pi \text{\$\Pi \text{\$\Pi \text{\$\Pi \	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA: ADK Special Opportunities GP, LLC (Name of Foreign Linuted 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 (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration 1 (See sections 605,0004 & 605,0005, F.S. to determine penalty liability) 350 LincolnRoad, 2ndFloor, MiamiBeach, FL33139 (Street Address of Principal Office) 350LincolnRoad, 2ndFloor, MiamiBeach, PL33139 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CTCorporationSystem Name: 1200 SouthPinelslandRoad Office Address: Plantation (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. CTCorporationSystem Chris Rickard (Registered agent s signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: NatKlipper AuthorizedSignatory 350LincolnRoad,2ndFloor,MiamiBeach,FL33139 9. Attached is a 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. (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 This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree follow as provided for in \$817.155, F.S. NatKlipper

Typed or printed name of signee



Page 1

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

DELAWARE, DO HEREBY CERTIFY "ADK SPECIAL OPPORTUNITIES GP, 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 SIXTH DAY OF APRIL, A.D. 2017.

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

TALLARIASSEE FLORIDA

6370917 8300

SR# 20172302389
You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Rudleck, Sacretory of State

Authentication: 202333142

Date: 04-06-17