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J. HARRIS

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 639222 , 4324715

AUTHORIZATION: Spelle le par

COST LIMIT : \$ 125.00

ORDER DATE: May 12, 2017

ORDER TIME : 1:19 PM

ORDER NO. : 639222-005

CUSTOMER NO: 4324715

FOREIGN FILINGS

NAME: DH LOGIX, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

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

1. A. S.

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Lamited Lability Compan	y; must include "Lim	ited Liability Com	pany," "L.L.C.," or "LLC.	")		
f name unavailable, enter alternate n	name adopted for the purpose o	f transacting business in l	Florida. The alternate	name must include "Limited Li	iability Company,"	"L.L.C," or	1.J.C.")
Delaware			_{3.} 81-	5265121			
(Jurisdiction under the law of w	hich foreign limited liability co	mpany is organized)		(FE) nus	nber, if applicable)	
	(Date first transacted but (See sections 605.0904)	siness in Florida, if prior & 605.0905, F.S. to deter	to registration.) runine penalty liability)			
1000 S. Tamiami Ti			6. <u>san</u>				
(Street Address of) Sarasota, Florida 34	•			(Mailing Ad	dress)		
Salasola, Fluida S	+230					1 2	
					<u>_</u>	<u> </u>	
31 L 15	ėmi ti		NOT	. 113	A	S =	
Name and street addres	_	d agent: (P.O. Bo	ox <u>NOT</u> accep	table)	,	<u> </u>	_
Name:	Arthur Day			·	30	}ે⊉ တ	
Office Address:	1000 S. Tamiami	Trail			, <u>i</u> m	S -	7
Office Addiess.				24000	<u>(</u>	· 10	54±
	Sarasota	(City)	<u>-</u>	, Florida 34236		<u>&</u>	U _k .
egistered agent's accep	tance.	(Cay)		(22p co	···/		
d accept the obligation.	s of my position as re		y	e performance of my	uunes, unu	1 am jumi	ittur n
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, -	s of my position as re	(Registered agent	's signature) has/have author			id Addres	
3. The name, title or caps	By: acity and address of the Name and Arthur Da	(Registered agent ine person(s) who in Address:	's signature) has/have author	rity to manage is/are:			
. The name, title or cape Title or Capacity:	By: acity and address of th Name and Arthur Da 1000 S. Tami	(Registered agent ine person(s) who in Address:	's signature) has/have author	rity to manage is/are:			
. The name, title or caps Title or Capacity:	By: acity and address of th Name and Arthur Da 1000 S. Tami	(Registered agent ine person(s) who in Address:	's signature) has/have author	rity to manage is/are:			
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. The name, title or caps Title or Capacity: Manager	By: acity and address of the Name and Arthur Da 1000 S. Tami	(Registered agent ine person(s) who in Address:	's signature) has/have author	rity to manage is/are:			
The name, title or cape Title or Capacity:	By: Acity and address of the Name and Arthur Da 1000 S. Tamis Sarasota, is sary) of existence, no more of which it is organize	(Registered agent (Registered agent ne person(s) who is Address: y Jami Trail Florida 34236	's signature) has/have author Title or	rity to manage is/are: Capacity:	Name an	y of record	s:
The name, title or caps Title or Capacity: Manager Use attachments if necess Attached is a certificate risdiction under the law of the law	By: Acity and address of the Name and Arthur Da 1000 S. Tamis Sarasota, is sary) of existence, no more of which it is organize	(Registered agent (Registered agent ne person(s) who is Address: y lami Trail Florida 34236	's signature) has/have author Title or	rity to manage is/are: Capacity: Cated by the official harman language, a translation	Name an	y of record	s:
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Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "DH LOGIX, 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 TWELFTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DH LOGIX, LLC"

WAS FORMED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2016.

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

Authentication: 202530730

Date: 05-12-17