

Florida Department of State
Division of Corporations
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Email Address: Keith.Poliakoff@Sawl.com

Foreign Limited Liability Company
DRSW, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

(((H) 7000337505 311))

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN COMPLIANCE WITH SECTION 605.092, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:1. DRSW, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, over structure name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Delaware 3. 82-3766284
(Jurisdiction under the laws of which foreign limited liability company is organized) (EIN number, if applicable)4. Upon qualification
(Date first transacted business in Florida or date of prior to registration)
(See sections 605.094 & 605.095, F.S. to determine penalty liability)5. 13351/13361 Saddle Road 6. c/o Saul Ewing Arnstein & Lehr
(Street Address of Principal Office) (Mailing Address)
Fort Myers, FL 33913 200 E. Las Olas Blvd., Suite 1000
Fort Lauderdale, FL 33301 ATTN: Keith Poliakoff

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Keith Poliakoff, c/o Saul Ewing Arnstein & Lehr
Office Address: 200 E. Las Olas Blvd., Suite 1000
Fort Lauderdale, Florida 33301
(City) (Zip code)

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 comply with 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.

Keith M. Poliakoff
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage in/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
President	<u>William C. Ennen</u> <u>14311 Metropolis Ave. #101</u> <u>Fort Myers, FL 33912</u>		
Vice President	<u>Keith M. Poliakoff</u> <u>200 E. Las Olas Blvd. #1000</u> <u>Fort Lauderdale, FL 33301</u>		

(Use attachments if necessary)

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)

10. 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 felony as provided for in s.817.155, F.S.

Keith M. Poliakoff
(Signature of an authorized person)Keith M. Poliakoff
(Typed or printed name of signer)

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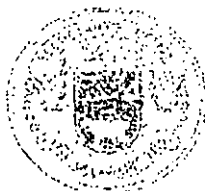
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Delaware

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The First State

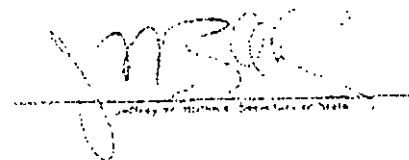
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "DRGW, LLC" IS DULY FORMED UNDER THE
LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE EIGHTEENTH DAY OF DECEMBER, A.D. 2017.



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SR# 2017/608275

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


Jeffrey W. Bullock, Secretary of State

Authentication: 703778083

Date: 12-18-17

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