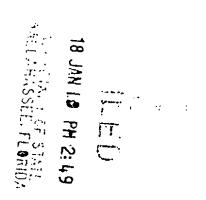
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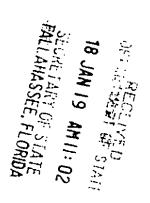
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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JAN 2 2 2016 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	: 120000000	195	
	REFERENCE	: 031536	158900A	
	AUTHORIZATION	Samuel De o	Mala	
	COST LIMIT	: (\$\125.00	naco	
ORDER DATE :	January 18, 2018			
ORDER TIME :	6:13 PM			
ORDER NO. :	031536-005			
CUSTOMER NO:	158900A			
	FOREIGN F	ILINGS		

NAME:	PNL	NEW	ERA,	LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:		
E X A IVI I NI E R •		
TTATATATATATATATATATATATATATATATATATAT		

COVER LETTER

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TO:		tration Section on of Corporation	s				
SUBJE		NL New Era, LLC.					
3,7,7,1	_		Name of L	imited Liability C	ompany		
The enc Existence	losed " ce, and	Application by Fore check are submitted	eign Limited Liability Compa I to register the above referen	any for Authorizat nced foreign limite	ion to Tra d liability	nsact Business in Florida," (company to transact busine	Certificate of ss in Florida.
Please r	eturn a	II correspondence c	oncerning this matter to the f	following:			
		David Poner					
			Na	me of Person			
		The PNL Comp	anies				
			Fir	m/Company			
		2100 Ross Ave,	Suite 2900				
				Address			
		Dallas, TX, 75	201				
			City/St	ate and Zip Code		7 - 11 - 7 -	
		tfredericks@pnlc	ompanies.com				
			E-mail address: (to be used	for future annual	report not	ificationì	
For furt	ther inf	ormation concerning	g this matter, please call:				
	Tara	Fredericks		214 _ at (379-900	00	
		Name o	f Contact Person	Area Code	Day	time Telephone Number	
	Divis Regis P.O.	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding coutive Center Circle ice, FL 32301	
Enclose		check for the follow 25.00 Filing Fee	ing amount: \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ig Fee &	S160.00 Filing Fee, Ce of Status & Certified Cop	

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

IN COMPLIANCE WITH SECTION (05,0X)2, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREXCY LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Plaware Durisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, 16p (See sections 605 0904 & 605 0905, F.S. to	3. <u>27-5113428</u>	
Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, 15p (See sections 605 0904 & 605,0905, F.S. to		
(See sections 605 0904 & 605 0905, F.S. to		I number, if applicable)
(See sections 605 0904 & 605 0905, F.S. to		
(See sections 605 0904 & 605 0905, F.S. to	prior to registration.	
	determine penalty liability)	
100 Ross Ave, Suite 2900	6. 2100 Ross Ave. Suite	
(Street Address of Principal Office) Oallas, TX, 75201	Oallas, TX 75201	g Address)
Glias, 1 A, 73201	Dailas, 1X 73201	
ame and street address of Florida registered agent: (P.O.	. Box NOT acceptable)	
Name: Corporation Service Company		
120111 5.		
Office Address: 1201 Hays Street		
Taliahassee	, Florida <u>32301</u>	₩
(Cuv)	12	(ip code)
By: (Registered	agent's signature)	Asst. Vice President
The name, title or canneity and address of the person(s) w	ho has/have authority to manage is/a	ster"
The name, title or capacity and address of the person(s) w Title or Capacity: Name and Address:	tho has/have authority to manage is/a <u>Title or Capacity:</u>	ne: Name and Address:
Title or Capacity: Name and Address:	Title or Capacity:	Name and Address:
Title or Capacity: Name and Address: Manager David Porter	<u>Title or Capacity:</u> Manager	Name and Address: Scott Kocurek
Title or Capacity: Name and Address:	<u>Title or Capacity:</u> Manager	Name and Address:
Title or Capacity: Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201	<u>Title or Capacity:</u> Manager	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2
Title or Capacity: Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan	Title or Capacity: Manager	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2
Title or Capacity: Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29	Title or Capacity: Manager	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2
Title or Capacity: Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan	Title or Capacity: Manager	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2
Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29 Dallas, TX 75201	Title or Capacity: Manager	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2
Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29 Dallas, TX 75201 e attachments if necessary)	Manager 2000	Name and Address: Scott Kocurek 2100 Ross Ave. Suite 2 Dallas, TX 75201
Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29 Dallas, TX 75201 e attachments if necessary) ttached is a certificate of existence, no more than 90 days	Manager 200 Oot Sold, duly authenticated by the offici	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2 Dallas, TX 75201 fall having custody of records in
Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29 Dallas, TX 75201 e attachments if necessary) ttached is a certificate of existence, no more than 90 days diction under the law of which it is organized. (If the cert	Manager 200 Oot Sold, duly authenticated by the offici	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2 Dallas, TX 75201 fall having custody of records in
Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29 Dallas, TX 75201 e attachments if necessary) ttached is a certificate of existence, no more than 90 days	Manager 200 Oot Sold, duly authenticated by the offici	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2 Dallas, TX 75201 fall having custody of records in
Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29 Dallas, TX 75201 e attachments if necessary) ttached is a certificate of existence, no more than 90 days diction under the law of which it is organized. (If the cert	Title or Capacity: Manager 200 300 3 old, duly authenticated by the officitificate is in a foreign language, a tra	Name and Address: Scott Kocurek 2100 Ross Ave. Suite 2 Dallas, TX 75201 ial having custody of records in instation of the certificate under
Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29 Dallas, TX 75201 e attachments if necessary) ttached is a certificate of existence, no more than 90 days diction under the law of which it is organized. (If the certie translator must be submitted) This document is executed in accordance with section 605 nitted in a document to the Department of State constitute	Title or Capacity: Manager 200 Sold, duly authenticated by the officitificate is in a foreign language, a tra 5.0203 (1) (b), Florida Statutes. I am a third degree felony as provided for	Name and Address: Scott Kocurek 2100 Ross Ave. Suite 2 Dallas, TX 75201 ial having custody of records in instation of the certificate under aware that any false informatio or in s.817.155, F.S.
Manager David Porter 2100 Ross Ave. Suite 29 Dallas, TX 75201 Manager Daniel Levitan 2100 Ross Ave. Suite 29 Dallas, TX 75201 e attachments if necessary) ttached is a certificate of existence, no more than 90 days diction under the law of which it is organized. (If the certie translator must be submitted) This document is executed in accordance with section 605 nitted in a document to the Department of State constitute	Title or Capacity: Manager 200 Sold, duly authenticated by the officitificate is in a foreign language, a tra 5.0203 (1) (b), Florida Statutes. I am	Name and Address: Scott Kocurek 2100 Ross Ave, Suite 2 Dallas, TX 75201 ial having custody of records in instation of the certificate under aware that any false information or in s.817.155, F.S.

Typed or printed name of signer



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

DELAWARE, DO HEREBY CERTIFY "PNL NEW ERA, 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 JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PNL NEW ERA,

LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2011.

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

at corn delaware gov/au

Authentication: 201993915

Date: 01-18-18