

M18000002204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

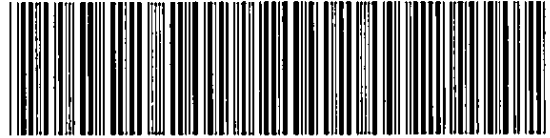
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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DEPARTMENT OF STATE
18 MAR -5 PM 12:29

J. LEGGETT
MAR 06 2018

FILED
18 MAR -5 AM 7:10

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserv.com
~~mailto:info@incserv.com~~



ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
~~melstops@incserv.com~~
850.656.7953

REQUEST DATE 3/5/2018

PRIORITY Routine

OUR REF # (Order ID#) 634359

ORDER ENTITY

DRAGON KNIGHT INVESTMENTS LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

DRAGON KNIGHT INVESTMENTS LLC (FL)

File the attached foreign qualification document

NOTES:

\$125.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "MS" or similar initials.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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

IN 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. Dragon Knight Investments LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC")

(If more appropriate, enter alternate name adopted for the purpose of conducting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FBI number, if applicable)

4. upon filing

(Date first transacted business in Florida, if prior to registration;
(See sections 605.091 & 605.092, F.S. to determine penalty liability))

5. 6965 Piazza Grande Avenue, Suite 414

(Street Address of Principal Office)

Orlando, FL 32835

6. 6965 Piazza Grande Avenue, Suite 414

(Mailing Address)

Orlando, FL 32835

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

Name: Milton C. Eliseu

Office Address: 6965 Piazza Grande Avenue, Suite 414

Orlando

(City)

, Florida 32835

(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.

X

[Signature]
(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Managing Member

Milton C. Eliseu

6965 Piazza Grande Avenue
Suite 414, Orlando, FL 32835

(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.

[Signature]
Signature of authorized person

Milton C. Eliseu

Typed or printed name of agent

FILED
18 MAR -5 AM 7:10

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DRAGON KNIGHT INVESTMENTS 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 FIFTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DRAGON KNIGHT INVESTMENTS LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2018.

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



6765322 8300

SR# 20181697580

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202253748

Date: 03-05-18