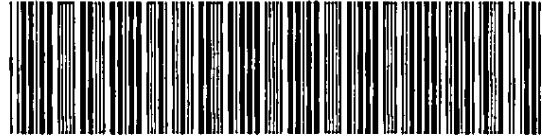


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03/19/18--01042--010 **125.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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APR 03 2018

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 MAR 29 AM 6:29

00111



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 21, 2018

AMY BARNARD
7940 VIA DELLAGIO WAY
STE 200
ORLANDO, FL 32819 US

SUBJECT: IDL PARENT LLC
Ref. Number: W18000027609

We have received your document for IDL PARENT LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 818A00005721

RECEIVED

2018 MAR 29 AM 11:14

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: IDL PARENT LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

AMY BARNARD

Name of Person

UNICORP NATIONAL DEVELOPMENTS, INC.

Firm/Company

7940 VIA DELLAGIO WAY, SUITE 200

Address

ORLANDO, FL 32819

City/State and Zip Code

AMYB@UNICORPUSA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AMY BARNARD

407

999-9985

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6227
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy

\$160.00 Filing Fee, Certificate
of Status & Certified Copy

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

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

1. IDL PARENT LLC
 (Name of Foreign Limited 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.")

2. DELAWARE 3. 90-0890077
 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

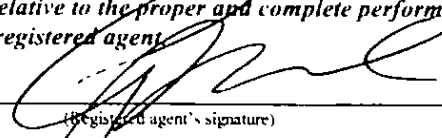
4. _____
 (Date first transacted business in Florida, if prior to registration.)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7940 VIA DELLAGIO WAY 6. 7940 VIA DELLAGIO WAY
 (Street Address of Principal Office) (Mailing Address)
SUITE 200 SUITE 200
ORLANDO, FL 32819 ORLANDO, FL 32819

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
 Name: AMY BARNARD
 Office Address: 7940 VIA DELLAGIO WAY, SUITE 200
ORLANDO, Florida 32819
 (City) (Zip code)

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATE AFFAIRS
 10 MAR 29 AM 6:25

Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated limited liability company as the person 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.


 (Registered agent's signature)

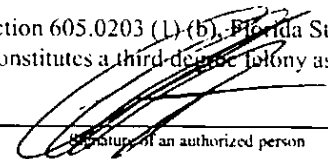
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>MEMBER</u>	<u>I-DRIVE WHEEL, LLC</u> <u>7940 Via Dellagio Way, #200</u> <u>Orlando, FL 32819</u>	<u>MEMBER</u>	<u>WHEEL L.L.C.</u> <u>4445 Wagon Trail Avenue</u> <u>Las Vegas, NV 89118</u>
<u>MEMBER</u>	<u>PDOK 3, LLC</u> <u>70 E 55TH ST, 23rd Floor</u> <u>New York, NY 10022</u>	<u>MEMBER</u>	<u>MAPLE HILL WHEEL LLC</u> <u>70 E 55TH ST, 23rd Floor</u> <u>New York, NY 10022</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.



 (Signature of an authorized person)

Charles Whittall

 Typed or printed name of signer

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IDL PARENT 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 MARCH, A.D. 2018.




Jeffrey W. Bullock, Secretary of State

5215939 8300

SR# 20181858961

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

Authentication: 202305709

Date: 03-12-18