M2100001650

(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:					
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S. FRANKLIN DEC - 8 2021

COVER LETTER

TO:

ľO:	Registration Section Division of Corporations					
1:D 11	Denali Capital, LLC					
Name of Limited Liability Company						
		y Company for Authorization to Transact Business in re referenced foreign limited liability company to tran				
lease	return all correspondence concerning this matte	r to the following:				
	Meredith Waltersq					
		Name of Person		-		
	Cornerstone Support, LLC					
		Firm/Company		-		
	70 Mansell Court, Suite 250					
	-	Address	۰	202		
	Roswell, GA 30076		 r= 1-	,2021 DEC		
	mwalters@cornerstonesupport.com	City/State and Zip Code	ALASSET T	-8 PM		
	E-mail address: (to	be used for future annual report notification)	- [<u>ئ</u> ن _	U	
or fur	ther information concerning this matter, please	call:		3 4		
	Meredith Walters	678 680-6080 		_		
	Name of Contact Person	Area Code Daytime Telephone N	umber			
	Mailing Address: Registration Section	Street Address: Registration Section				
Division of Corporations P.O. Box 6327		Division of Corporations				
		The Centre of Tallahassee				
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DI S125.00 Filing Fee S130.00 Filing Certificate	EPARTMENT OF STATE Fee & □ □ \$155.00 Filing Fee & □ \$160.00 Fil	ling Fee, us & Cer			

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

IN COMPLANCE WITH SECTION (05,000), FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY

COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA: Denali Capital, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC") DC ASSET MANAGEMENT, LLC
name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Lunited Liability Company," "L.L.C," or "LTC") 86-2377863 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability) 2015 3rd. Ave. North (Street Address of Principal Office) Birmingham, AL 35203 Birmingham, AL 35203 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee

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.

Lynn M. Canne Longo Lynn M. Canne Longo, AVP
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
(Manager	Name: Christopher Devine	iManager	Name: Banda Ryan
□Member	Address: 2015 3rd. Ave. North	□Member	Address: 2015 3rd. Ave. North
[≱Authorized	Birmingham, AL 35203	⊠Authorized	Birmingham, AL 35203
Person		Person	
□Other	Other	□Other	Other
(Manager	Name: Amy Dowdey	□Manager	Name: Denali Capital Holdings, LLC
□Member	Address: 2015 3rd, Ave. North	Member	Address: 2015 3rd. Aue. North
⊈ Authorized	Birmingham, Al. 35203	□Authorized	Birmingham, AL 35203
Person		Person	<u> </u>
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	(/) C
Person		Person	
□Other	Other	□Other	CO. T

<u>Important Notice:</u> Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Amy Dowdey

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "DENALI CAPITAL, 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 EIGHTH DAY OF NOVEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DENALI CAPITAL, LLC" WAS FORMED ON THE FOURTH DAY OF FEBRUARY, A.D. 2021.

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

2021 DEC -8 PH 6: 34

Authentication: 204622580

Date: 11-08-21

4988651 8300 SR# 20213728406





November 17, 2021

MEREDITH WALTERSQ 70 MANSELL COURT STE 250 ROSWELL, GA 30076 US

SUBJECT: DENALI CAPITAL, LLC Ref. Number: W21000149270

We have received your document for DENALI CAPITAL, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please return 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.

Sharon D Franklin Regulatory Specialist II

RECFINED

Letter Number: 621A00027971