M2300000987

(Requestor's Name)
(10,100,000)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. ROBERTS

JAN 2 6 2023

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195									
REFERENCE : 410276 8276728									
AUTHORIZATION : MALLE BOLL									
COST LIMIT : \$ 125.00									
ORDER DATE : January 25, 2023									
ORDER TIME : 1:38 PM									
ORDER NO. : 410276-005									
CUSTOMER NO: 8276728									
FOREIGN FILINGS									
NAME: DLC MORTGAGES II, LLC									
XXXX QUALIFICATION (TYPE: <u>LL</u>)									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING									

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:		DLC Mortgages II, LLC							
_		Name of	Limited Liability Con	npany					
		reign Limited Liability Com d to register the above refer							
Please return a	Il correspondence o	concerning this matter to the	following:						
	Jamie Mandel								
		N	ame of Person						
	DLC Capital N	lanagement, LLC							
	Firm/Company								
	3921 Alton Ro	ad #465							
			Address						
	Miami Beach,	FL 33140							
		City/S	tate and Zip Code						
	jbmandel@dlcca								
		E-mail address: (to be use	d for future annual rep	oort noti	fication)				
For further info	ormation concernin	g this matter, please call:							
Jamie	: Mandel		917 :	593-164	4				
	Name o	f Contact Person	Area Code	Dayti	ime Telephone Number				
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301							
	heck for the follow 25.00 Filing Fee	ing amount: S130.00 Filing Fee & Certificate of Status	S155.00 Filing F Certified Copy	ec &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop				

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ability Company," "L.L.C. 	Iternate name adopted for the purpose "or "LLC.")		in Florida. The alternate nam	e must include "Lim
Delaware	of which foreign limited liability	3. applied for	(FEI number, if applicable)	
company is organized)	-			

	(Date first transacted busines (See sections 605,0904 & 605.6	ss in Florida, if prior to r 1905, F.S. to determine	egistration.) penalty liability)	
3921 Alton Road #465	;			
Miami Beach, FL 331-				
Mami Beach, FL 331-	(Street Address of P	rincinal Office)		
3921 Alton Road #465		· ·		
				. 2û
Miami Beach, FL 331-	10 (A table a			7.
				2023 J. 1. 25
Name and street address	ss of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptal	ble)	: 2
Name:	Corporation Service Company			10= 114
Office Address:	1201 Hays Street			
office fideless.			32301	9: 1,9
	(City)		(Zip code)	9
egistered agent's accep wing been named as re	rgistered agent and to accept servition, I hereby accept the appoints	ment as registered ag	ent and agree to act in this	capacity. I furth
signated in this applica complywith the provisi	ons of all statutes relative to the p my position as registered agent. Corporation Service Company By: ([(1,4,422] Laten acceptance) (Register	,		
signated in this applica complywith the provisi cept the obligations of i	ons of all statutes relative to the p my position as registered agent. Corporation Service Company	red agent's signature)		
signated in this applica complywith the provisi cept the obligations of i	ons of all statutes relative to the p my position as registered agent. Corporation Service Company By: (fry Later) as (Registe acity and address of the person(s)	red agent's signature)		
signated in this applica complywith the provisi cept the obligations of a The name, title or capa	ons of all statutes relative to the p my position as registered agent. Corporation Service Company By: (fry Later) as (Registe acity and address of the person(s)	red agent's signature)		
signated in this applica complywith the provisi cept the obligations of a The name, title or capa LC Capital Managemen	ons of all statutes relative to the p my position as registered agent. Corporation Service Company By: (fry Later) as (Registe acity and address of the person(s)	red agent's signature)		

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.

Page 1



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

DELAWARE, DO HEREBY CERTIFY "DLC MORTGAGES II, 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 TWENTY-FIFTH DAY OF JANUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DLC MORTGAGES

II, LLC" WAS FORMED ON THE EIGHTH DAY OF DECEMBER, A.D. 2022.

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

Authentication: 202570884

Date: 01-25-23