## M2300008108

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	· · · · · · · · · · · · · · · · · · ·
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000410282000

PILED

RECEIVED

2023 JUN 21 PH 3: 23

SECRETARY OF STATE

RECRESSES FLORING

RECRESSES FLORING

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195

REFERENCE: 823403 8276728

AUTHORIZATION :

ORDER DATE: June 19, 2023

ORDER TIME : 1:46 PM

ORDER NO. : 823403-010

CUSTOMER NO: 8276728

## FOREIGN FILINGS

NAME: 3812-3814 WAREHOUSE, 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: Eyliena Baker -- EXT#

EXAMINER:

## COVER LETTER

	Registration : Division of C		18				
SUBJEC		4 Warehou	se. LLC				
30/15/150	<u></u>		Name	of Limited Liability	Company	-	
						unsact Business in Florida," Certifi y company to transact business in l	
Please re	turn all corres	oondence c	oncerning this matter to t	he following:			
	Jami	e Mandel					
				Name of Person			
	DLC	Capital M	anagement, LLC				
				Firm/Company		· · · · · · · · · · · · · · · · · · ·	
	3921	Alton Roa	ad #465				
				Address			
	Miar	ni Beach, I	FL 33140				
	-		City	//State and Zip Code			
	jbman	del@dlcca	pmgmt.com				
			E-mail address: (to be u	sed for future annual	l report not	ification)	
For further	er information	concerning	g this matter, please call:				
	Jamie Mandel			917 at (	593-16	44	
-		Name o	f Contact Person	Area Code	Day	time Telephone Number	
] 	MAILING AIDivision of Co Registration S P.O. Box 6327 Tallahassee, F	rporations ection			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ec, FL 32301	
	is a check for □ \$125.00 Fil		ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	: \$155.00 Filin Certified Copy	ıg Fee &	S160.00 Filing Fee, Certificat of Status & Certified Copy	e

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

IN COMPILANCE 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. 3812-3814 Warehouse.	LLC  ign Limited Liability Company: n	nuse include of indeed Li	ability Company 221 I C 20	
Warehouse 3812-3814, L	_	nust include Limited Li	annity Company. 1.11.C., o	1 LIX. )
	ternate name adopted for the purpo	ose of transacting busine	ess in Florida. The alternate na	une must include "Limited
2. Delaware		3 applied for		
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI number, if applicable	e)
4	(Date first transacted bus)	iness in Florida, it prior	to registration.)	_
5. 3921 Alton Road #465	(See sections 605.0904 & 60	05.0905, F.S. to determi	ne penalty liability)	_
Miami Beach, FL 331-	0			
	(Street Address o	of Principal Office)		_
6. 3921 Alton Road #465				_
Miami Beach, FL 3314	0		·	
	(Mailin <sub>t</sub>	g Address)		<del>-</del>
7. Name and street address	s of Florida registered agent: (	P.O. Box NOT accep	otable)	<b>20</b>
Name:	Corporation Service Compan	) y	_	TACRE TO
Office Address:	1201 Hays Street		_	2 T
	Tallahassee		Florida 32301	32 III
Registered agent's accep	(City)		(Zip code)	TO A CO
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept setion, I hereby accept the appoil ons of all statutes relative to the my position as registered agent Corporation Service Compa By:	intment as registered ne proper and comple t. any Eylim	agent and agree to act in the performance of my dutient Vice President	bility company at the place his capacity. Esfurther agree
	(*****		•	
•	city and address of the person(	(s) who has/have author	ority to manage is/are:	
DLC Capital Managemen	i, LLC, manager	<u> </u>	<u> </u>	
3921 Alton Road #465				
Miami Beach, FL 33140				<del></del>
	of existence, no more than 90 of which it is organized. (If the ibmitted)			
	102 Y		•	
	Signatu	re of an authorized person	on	_
	in accordance with section 605 the Department of State consti			

Typed or printed name of signee

Jamie Mandel



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

DELAWARE, DO HEREBY CERTIFY "3812-3814 WAREHOUSE, 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-FIRST DAY OF JUNE, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "3812-3814"
WAREHOUSE, LLC" WAS FORMED ON THE TWENTIETH DAY OF JUNE, A.D. 2023.

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



Authentication: 203589144

Date: 06-21-23