(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





To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 01/16/25 Order #: 1775438-1

Re: Drp Solaris Fl 1, LLC Processing Method: Routine

#### TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.0 - FL State Account Number:

12000000195

Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

### **COVER LETTER**

то:		ation Section n of Corporation	ns			
SUBJEC		P Solaris FL 1, L	.I.C			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Name of	Limited Liability (	Company	
						insact Business in Florida," Certificate of company to transact business in Florida.
Please re	eturn all	correspondence c	oncerning this matter to the	following:		
		Houdin Honary	ar			
			N	ame of Person	-	
		DW Partners, 1.	.P			
			Fi	rm/Company		
		520 Madison A	venue, 21st Floor			
				Address		
		New York, NY	10022			
			City/S	tate and Zip Code		
		DW.Legal@dwp				
			E-mail address: (to be used	for future annual	report not	ification)
For furth	ner infor	mation concerning	g this matter, please call:			
	Houdin	Honarvar		212 at (	751-613	60
		Name o	f Contact Person	Area Code	Day	time Telephone Number
	Divisio Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301
Enclosed		eck for the follow 5.00 Filing Fee	ing amount:  ☐ \$130.00 Filing Fee &  Certificate of Status	□ \$155.00 Filir Certified Copy	ig Fee &	☐ \$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 STATUTEN THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	me adopted for the purpose of transacting business in Florida	The alternate name must include "Limited L	iability Company," "1. L.C," or "LLC."
Delaware		3	
(Jurisdiction under the law of wh	ich föreign limited liability company is organized)	(FE) nur	mber, if applicable)
January 15, 2025			
	(Date first transacted business in Florida, if prior to regu (See sections 605,0904 & 605,0905, F.S. to determine p	istration ) penalty liability)	
DW Partners, LP		6. DW Partners, LP	
(Street Address of Pr 520 Madison Avenue, 2	-	(Mailing Ad 520 Madison Avenue, 21s	
	.TSCF (OO)	·	
New York, NY 10022		New York, NY 10022	25
			JAN 16
Name and street address	$\underline{s}$ of Florida registered agent: (P.O. Box $\underline{N}$	NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		™H12: 36
Office Address.			٠ <u>٠</u> ٠ د
	Tallahassee	, Florida 32301 (Zip co	
wing been named as reg signated in this applicat comply with the provision	gistered agent and to accept service of pro- tion, I hereby accept the appointment as roons of all statutes relative to the proper and tof my position as registered agent.  Corporation Service Company	ocess for the above stated limite egistered agent and agree to ac nd complete performance of my	ed liability company at the part in this capacity. I further
wing been named as reg signated in this applicat comply with the provision	tance: existered agent and to accept service of pro- cion, I hereby accept the appointment as re- cons of all statutes relative to the proper an cof my position as registered agent. Corporation Service Company	ocess for the above stated limite egistered agent and agree to ac nd complete performance of my	ed liability company at the part in this capacity. I further
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Typed or printed name of signee

QUAL-59403

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "DRP SOLARIS FL 1, 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 FIFTEENTH DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DRP SOLARIS FL 1, LLC" WAS FORMED ON THE FOURTEENTH DAY OF JANUARY, A.D. 2025.

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



Authentication: 202702509

Date: 01-15-25

10066450 8300 SR# 20250142409