STATE OF DELAWARE CERTIFICATE OF FORMATION OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

- 1. The name of the limited liability company is $\underline{MVK LLC}$.
- The Registered Office of the limited liability company in the State of Delaware is located at <u>714 ANGELOU AVE</u> (street), in the City of <u>MIDDLETOWN</u>, Zip Code <u>19709</u>. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is <u>ASHISH PATNALA</u>.

By: _____ASHISH PATNALA

Authorized Person

Name: ASHISH PATNALA

Print or Type