

7/13/2021

Division of Corporations

B210002690290

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000269838 3))



H210002698383ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : Vcorp SERVICES, LLC  
Account Number : 12008000067  
Phone : (845)425-0077  
Fax Number : (845)818-3588

FILED  
2021 JUL 14 PM 4: 22  
TALLAHASSEE, FLORIDA

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA/FOREIGN LP/LLLP  
BlockTower Gamma Point Fund LP

|                       |            |
|-----------------------|------------|
| Certificate of Status | 1          |
| Certified Copy        | 1          |
| Page Count            | 02         |
| Estimated Charge      | \$1,061.25 |

RECEIVED  
2021 JUL 14 AM 10:01  
SECURE PAYMENTS MAIL  
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

R. SALY  
JUL 15 2021

H21000269838 3

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

FILED 2021 JUL 14 PM 4:22 JENNIFER HARRIS, CLERK FALLAHASSEE, FLORIDA

1. BlockTower Gamma Point Fund LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or L.L.P.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware State or Country of Formation 3. October 11, 2018 Date of Formation

4. Federal Employer Identification Number: 83-2207799

5. Name of Registered Agent for Service of Process and Florida Street Address:

Vcorp Services, LLC 8011 South State Road 7, Suite 106 Davie, FL 33314

6. 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.

By: [Signature] Signature of Registered Agent

7. Principal Office: 501 Brickell Key Dr, Suite 601 Miami, FL, 33131

8. Mailing Address: 501 Brickell Key Dr, Suite 601 Miami, FL, 33131

9. If limited partnership is a limited liability limited partnership, check box. [ ]

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: BlockTower Gamma Point LLC Name of General Partner: Street Address: 501 Brickell Key Dr, Suite 601 Miami, FL, 33131 Street Address: Mailing Address: 501 Brickell Key Dr, Suite 601 Miami, FL, 33131 Mailing Address: Name of General Partner: Name of General Partner: Street Address: Street Address: Mailing Address: Mailing Address:

FILED  
2021 JUL 14 PM 4:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H21000269838 3

Name of General Partner: \_\_\_\_\_ Name of General Partner: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ Street Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_

11. Effective date, if other than the date of filing: \_\_\_\_\_  
*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*  
 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 7th day of July, 2021



Matthew Goetz, Authorized Signatory, BlockTower Gamma Point LLC,  
 General Partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

|  |   |
|--|---|
| <b>Filing Fees:</b>                      | \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) |
| <b>Certified Copy (optional):</b>        | \$52.50   |
| <b>Certificate of Status (optional):</b> | \$8.75  |

H21000269838 3

H21000269838 3

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLOCKTOWER GAMMA POINT FUND LP" 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 THIRTEENTH DAY OF JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLOCKTOWER GAMMA POINT FUND LP" WAS FORMED ON THE ELEVENTH DAY OF OCTOBER, A.D. 2018.

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

2021 JUL 14 PM 4:23  
 STATE OF DELAWARE  
 FALL HASSELL, CLERK

FILED



*Jeffrey W. Bullock*  
 Jeffrey W. Bullock, Secretary of State

7097081 8300

SR# 20212696621

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203665311

Date: 07-13-21