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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lexington Park Advisors, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Rajib Das			
Name of Person			
Lexington Park Advisors, LLC			
Firm/Company			
6036 Greatwater Dr			
Address	<u>s</u>		
Windermere, FL 34786	H CRE	5 FEB	-7-
City/State and Zip Code	2	\sim	UMIANA [P M4 k
rdas@lexparkgroup.com	ूरी पुरे कर्म 11 /	0 Fil	; ; T
E-mail address: (to be used for future annual report notification)	-1.,	ůi ⊒∷	
For further information concerning this matter, please call:		: 00	* ***
Rajib Das917 _,4463186			
Name of Contact Person Area Code Daytime Telephone Nu	mber		

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

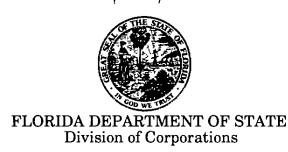
Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy



January 29, 2015

RAJIB DAS LEXINGTON PARK ADVISORS, LLC 6036 GREATWATER DR WINDERMERE, FL 34786

SUBJECT: LEXINGTON PARK ADVISORS, LLC

Ref. Number: W15000006657

We have received your document for LEXINGTON PARK ADVISORS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 915A00001868

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA S FOREIGN LIMITED LIABILITY COMPANY TO TRANSAC			TED TO I	REGIS	TER A
Lexington Park Advisors, LLC					
(Name of Foreign Limited Liability Company; must inc	lude "Limited Liability	Company," "L.L.C.," or "LL	.C.'')		
(If name unavailable, enter alternate name adopted for the purpose of	transacting business in	Florida. The alternate name i	must includ	de "Lim	ited
Liability Company," "L.L.C," or "LLC.")	_{3.} 90-0672	2824			
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)	3. 30-007	(FEI number, if applicable)			
4. Not Applicable (Date first transported business i	n Elorida, if prior to reg	istration)			
(Date first transacted business i (See sections 605.0904 & 605.090		. —	^^		
_{5.} 4700 Millenea Blvd, Suite	175, Orlar	ido, FL 328	39		
			CA CA	5	
	ess of Principal Office)			- 22 -	. Er
6 6036 Greatwater Dr, Winde	ermere, Fl	_ 34786	2	Ö	J
	1		-::,	=:)]
(Mai	iling Address)			<u>ය</u>	. •
7. The name, title or capacity and address of the pe	man(a) who haa/h	ova outhority to mana	iclare	<u> </u>	
Rajib Das	ison(s) who has/in	ave authority to mana	ge is/are	, ,	
CEO, Lexington Park Adviso	ors, LLC				-
6036 Greatwater Dr, Winder	mere, FL	34786			
8. Attached is an original certificate of existence, no having custody of records in the jurisdiction under the					icial
acceptable. If the certificate is in a foreign language, must be submitted)	a translation of th				lator
Jan Jan	l Dul				
	an authorized per		ali a Cara di	المــــــــــــــــــــــــــــــــــــ	* · · · · · · · · · · · · · · · ·
(In accordance with section 605.0203, F.S., the execution of this document co am aware that any false information submitted in a document to the Departme	onstitutes an affirmation un ent of State constitutes a th	der the penalties of perjury that ird degree felony as provided for	the facts star in s.817.15	ited here: 55, F.S.)	in are true. I

Typed or printed name of signee

Rajib Das

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	he Limited Liability Comp ר Park Advisor	•			
If unavailable, th	e alternate to be used in th	ne state of Florida is:			
2. The name and	the Florida street address	of the registered agent and office are:		15	
	Rajib Das	,		FEB	
		(Name)	= 55 % 22 %	20	i ang
	6036 Greatwa	ter Dr	71.	PH .	,
-	Florida Street Ad	Idress (P.O. Box NOT ACCEPTABLE)	- 45. 31.	5: 00	• ~-
,	Windermere	34786	•	_	
-		City/State/Zip	_		
liability company registered agent c statutes relating t	at the place designated in and agree to act in this cap o the proper and complete	to accept service of process for the above this certificate, I hereby accept the appoint acity. I further agree to comply with the properformance of my duties, and I am familicatered agent as provided for in Chapter 60	tment as rovisions (ar with an	of all	

\$	100.00	Filing Fee for Application
\$	25.00	Designation of Registered Agent
\$	30.00	Certified Copy (optional)
S	5.00	Certificate of Status (optional)

(Signature)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "LEXINGTON PARK ADVISORS, 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 FIFTH DAY OF JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEXINGTON PARK ADVISORS, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF JANUARY, A.D. 2011.

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

TB 20 PH 5: 00

4931022 8300

150008592

AUTHENTY CATION: 2009293

DATE: 01-05-15

You may verify this certificate online at corp.delaware.gov/authver.shtml