# m17000000199

(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
(Bu	ısiness Entity Na	me)			
(Document Number)					
Certified Copies	_ Certificate	s of Status			
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12/08/16--01021--014 \*\*100.00

01/09/17--01036--005 \*\*25.00



D. SCOTT JAN 9 2017



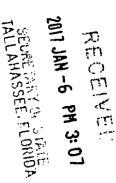
#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 9, 2016

YANINA MICULITZKI, ESQ. 20801 BISCAYNE BLVD, SUITE 306 AVENTURA, FL 33180

SUBJECT: BLOCK CAPITAL GROUP LLC

Ref. Number: W16000082459



We have received your document for BLOCK CAPITAL GROUP LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 616A0002623

#### **COVER LETTER**

TO:	Registration Section Division of Corporation	ns				
SUBJE	ест: Ви	OCK CAPIT	AL GROUP	OP LLC	7	<del></del>
	closed "Application by Force, and check are submitted					
Please	return all correspondence c	concerning this matter to t	he following:			
		anina Mi	Cull 3ki Name of Person	EA9.		
		Janina Min	Eirm/Company	ΡΛ		-
	<u> 20</u> 9	BOI BISCO	YR Blue Address	d, Su	ilo 306	<u> </u>
	<u>tuen</u>	tuca, Fl.	331 & Code	<u> </u>		
	<u>ya</u>	nina@ Micul E-mail address: (to be u	#3kilaw.sed for future annual	report notifica	ation)	
For furt	her information concerning	g this matter, please call:				
	Yanina M Name o	<u>icultzki</u> f Contact Person	at ( <u>+86</u> Area Code	_) <u>36/</u> Daytimo	'- S56 7 e Telephone Num	her
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of C Registration : Clifton Build 2661 Executi Tallahassee.	Corporations Section ling ve Center Circle	<b>∃</b>
Enclose	d is a check for the follow CA\$125.00 Filing Fee	ing amount:  \$\Bigsize \\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filir Certified Copy		l \$160.00 Filing F f Status & Certifie	

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

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:				
1. Block CAPITAL GROUP LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")				
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")				
2. De la ware (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)				
4. (Date first transacted business in Florida, if prior to registration.)				
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  5. 8 19950 W. COUNTRY CUB CRIVE				
Suite 900, Aventura ff 33/80 (Street Address of Principal Office)				
6. 19950 W. country dub druie				
Scull 900, Augustura Fl 33180				
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)				
Name: Yanna Miculiaki, Esq.				
Office Address: 20801 BISCOYNE BIVELSUITESOS				
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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.				
accept the obligations of my position as registered agent.				
(Registered agent's signature)				
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:				
Martin Miculitski Manager				
Elias Amkie Levy, mainagel				
19950 W. country dub drive suite 900 Aventura, A 33100				
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)  Signature of an authorized person				
This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any 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.				
Typed or printed name of signee				

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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BLOCK CAPITAL GROUP, 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 NINETEENTH DAY OF DECEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLOCK CAPITAL GROUP, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2015.

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





Authentication: 203544165

Date: 12-19-16