

M17000006101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

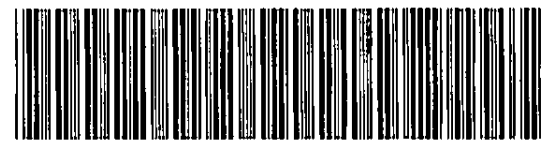
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEAL OF STATE
TALLAHASSEE, FLORIDA

S. WARREN
JUL 19 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GRANIER MANAGEMENT USA 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:

JOSEPH C. WASCH, ESQ.
Name of Person

WASCH RAINES LLP
Firm/Company

2500 N. MILITARY TRAIL, SUITE 465
Address

BOCA RATON, FL 33431
City/State and Zip Code

JWASCH@WASCHRAINES.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSEPH C. WASCH at (561) 693-3231
Name of Contact Person Area Code Daytime Telephone Number

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

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. GRANIER MANAGEMENT USA 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. DELAWARE 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 18230 COLLINS AVENUE 6. 18230 COLLINS AVENUE
(Street Address of Principal Office) (Mailing Address)
SUNNY ISLES BEACH, FL 33160 SUNNY ISLES BEACH, FL 33160

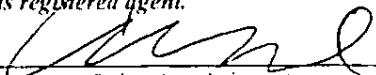
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ADAM G. WASCH
 Office Address: 2500 N. MILITARY TRAIL, SUITE 100
BOCA RATON, Florida 33431
(City) (Zip code)

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 17 JUL 17 PM 4:14
 DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

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 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.


(Registered agent's signature)

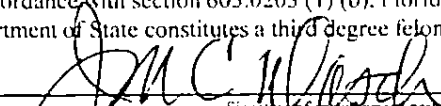
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>MANAGER</u>	<u>JUAN PEDRO CONDE JIMENEZ</u> <u>18230 COLLINS AVENUE</u> <u>SUNNY ISLES BEACH, FL 33160</u>	_____	_____
<u>AUTHORIZED SIGN</u>	<u>JUAN PAZOS ROMERO</u> <u>18230 COLLINS AVENUE</u> <u>SUNNY ISLES BEACH, FL 33160</u>	_____	_____

(Use attachments if necessary)

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)

10. 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.


Signature of an authorized person
JOSEPH C. WASCH
Typed or printed name of signer

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GRANIER MANAGEMENT USA 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 THIRTEENTH DAY OF JUNE, A.D. 2017.



5485472 8300

SR# 20174132772

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202703049

Date: 06-13-17