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To: Division of Corporations
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From: Account Name : BUSINESS FILINGS
Account Number : 105256001620
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Email Address: asmelyansky@maccabicapital.com

**Foreign Limited Liability Company
Maccabi Capital Management, LLC**

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Fax Audit # H190002287613

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

IN COMPLIANCE WITH SECTION 605.092, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Maccabi Capital Management, LLC

(Name of Foreign Limited Liability Company must include "Limited Liability Company," "LLC," or "LLP.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLP.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

(If applicable, U.S. number)

3. Upon Qualification

(Date first transacted business in Florida, if prior to registration. (See sections 605.0901 & 605.0905, F.S., to determine penalty liability.)

4. 7950 NW 53rd Street, Suite 337, Miami, Florida 33166

(Street Address of Principal Office)

5. 7950 NW 53rd Street, Suite 337, Miami, Florida 33166

(Mailing Address)

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

Name Business Filings Incorporated

Office Address 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(Zip code)

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.

Mark Williams

(Registered agent's signature) Mark Williams, A.V.P., Business Filings Incorporated

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

Member: Arthur Smelyansky, 7950 NW 53rd Street, Suite 337, Miami, Florida 33166

Member: Sergiy Shehavyelyev, 7950 NW 53rd Street, Suite 337, Miami, Florida 33166

8. 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.)

A. Cee

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.

Arthur Smelyansky, Member

Typed or printed name of signer

FILED
2019 JUL 31 PM 4:33
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MACCABI CAPITAL MANAGEMENT, 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 TWENTY-SIXTH DAY OF JULY, A.D. 2019.

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

2019 JUL 31 PM 4:33
TALLAHASSEE, FLORIDA



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SR# 20196182475

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: 203296235

Date: 07-26-19