6/4/2015 3:49:59 PM From: To: 8506176383(1/5)

Division of Corporations Page 1 of 1 First Department of St. Page 1 of 1 Page 1 of 1 First Department of St. Page 1 of 1

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Foreign Limited Liability Company OnPoint Capital Partners, LLC

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T. SCOTT

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5/4/20	15 3:49:59 PM From: To: 850617	52921 215 1	
), 4, 20		6363(2/3)	
		COVER LETTER	
т(Division of Corporations		
SI	IBJECT: OnPoint Capital Partners LLC		
	Name	of Limited Liability Company	
Th Ex	te enclosed "Application by Foreign Limited Liable istence, and check are submitted to register the ab	ility Company for Authorization to Transact Business in Florida, ove referenced foreign limited liability company to transact busin	Certificate of less in Florida
Pi	ease return all correspondence concerning this mat	tter to the following:	
	Robert Zangrillo		
		Name of Person	
	Dragon Global Management LLC		
		Firm/Company	
	1521 Alton Road #352		
		Address	
	Miami Beach, FL 33139		
	Wildlin Dodon, 12 37137	City/State and Zip Code	
	dede@dragonglobal.com		
		(to be used for future annual report notification)	•
Fo	or further information concerning this matter, please	se call:	
	Dede Loftus	at (650) 533-3213	
	Name of Contact Person	at (650) 533-3213 Area Code Daytime Telephone Number	,
	MAILING ADDRESS:	STREET ADDRESS:	
	Division of Corporations	Division of Corporations	
	Registration Section P.O. Box 6327	Registration Section Cliffon Poilding	
	Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
	· MIIMINGAAN I AA A BA I A	Tallahassee, FL 32301	

☐ \$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:

OnPoint Capital Partners 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 Florids. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")
2. Delaware 3. 47-1472409
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. Has not Begun
(Date first transacted hutiness in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5
1521 Alton Road #352, Miami Beach. FL 33139 (Street Address of Principal Office)
6. 1521 Alton Road #352, Miami Beach, FL 33139
ے۔ پ
(Mailing Address)
7. Inc name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Robert Zangrillo for Manager Dragon Global Mangement- 1512 Alton Road #352, Miami Beach FL 33139
Construction of Manager Stages Global Managericine 1712 Allen Rollin 322 Million Scale 12 33137
\sim
8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
121
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are training and any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a 817.155, F.S.)
Dede Lofius
Typed or printed name of signee

1. The name of the Limited Liability Company is:

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.

OnPoint Capita	al Purtners, LLC	·			
If unavailable, the alternate to be used in the state of Florida is:					
2. The name	and the Florida street address of	of the registered agent and office are:			
	CT Corporation System				
	(Nanœ)				
	1200 South Pine Island Road				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation	FL 33324			
		City/State/Zip			
liability comp registered ag statutes relat	pany at the place designated in the ent and agree to act in this cupa ing to the proper and complete p	o accept service of process for the above stated limited his certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of a performance of my duties, and I am familiar with and tered agent as provided for in Chapter 605, Florida			
	By: C T Corporation System	ture)			
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)			

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ONPOINT CAPITAL PARTNERS, 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 FOURTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5756897 8300

150880418

ou may vorify this certificate online

Jeffrey W. Bullock, Secretary of State

DATE: 06-04-15