M19000004132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 04/24/2019

Name: **Joy Weaver**

Reference #: **1073914**

Entity Name: **BONDHOUSE ADVISERS, LLC**

- [x] Articles of Incorporation/Authorization to Transact Business
- [ ] Amendment
- [ ] Change of Agent
- [ ] Reinstatement
- [ ] Conversion
- [ ] Merger
- [ ] Dissolution/Withdrawal
- [ ] Fictitious Name
- [ ] Other _____

Authorized Amount: **$125**

Signature: _____

CORPORATE HQ
COGENCY GLOBAL INC.
10 E 40TH ST, 10TH FL
NY, NY 10016
D: +1.212.947.7200
P: 800.221.0102
F: 800.944.6607

EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES,
REGISTRY #8010712
6 LLOYDS AVE, UNIT 4CL
LONDON EC3N 3AX
+44 (0)20.3961.3080

ASIA PACIFIC HQ
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A HONG KONG LIMITED COMPANY
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103 LEIGHTON RD, CAUSEWAY BAY
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- [ ] Other _____

Authorized Amount: **$125**

Signature: _____

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. BondHouse Advisers, 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
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 83-4441818
(FEI number, if applicable)

4. upon approval
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 20200 West Dixie Hwy, Ste 1102
(Street Address of Principal Office)
Miami, Florida 33180

6. 20200 West Dixie Hwy, Ste 1102
(Mailing Address)
Miami, Florida 33180

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

Name: Eli Gross

Office Address: 20200 West Dixie Hwy, Ste 1102

Miami, Florida 33180
(City) (Zip code)

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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)

4830 2543 8613

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■ Manager	Name: Adam Green	☐ Manager	Name:
☐ Member	Address: 3680 NE 201st Street	☐ Member	Address:
☐ Authorized	Aventura, FL 33180	☐ Authorized	
Person		Person	
☐ Other	☐ Other	☐ Other	☐ Other
■ Manager	Name: Steve Gross	☐ Manager	Name:
☐ Member	Address: 437 Arlington Road	☐ Member	Address:
☐ Authorized	Cedarhurst, NY 11516	☐ Authorized	
Person		Person	
☐ Other	☐ Other	☐ Other	☐ Other
■ Manager	Name: Eli Gross	☐ Manager	Name:
☐ Member	Address: 2936 West Morse Avenue	☐ Member	Address:
☐ Authorized	Chicago, IL 60645	☐ Authorized	
Person		Person	
☐ Other	☐ Other	☐ Other	☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

Eli Gross

Typed or printed name of signee

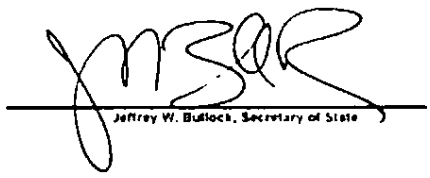
Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BONDHOUSE ADVISERS, 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-FOURTH DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BONDHOUSE ADVISERS, LLC" WAS FORMED ON THE FIFTEENTH DAY OF APRIL, A.D. 2019.

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





7374427 8300

SR# 20193120148

Authentication: 202699887

Date: 04-24-19

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