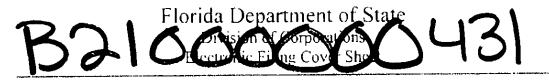
From: Tara Miller

9/23/2021

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003579313)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DUANE MORRIS LLP Account Number : I19990000059 Phone : (305)960-2217 Fax Number : (305)397-2683

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

TLMILLER@DUANEMORRIS.COM Email Address:

FLORIDA/FOREIGN LP/LLLP BRAINSTATION LP

Certificate of Status	0
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Corporate Filing Menu

Help

21000357931

From: Tara Miller

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

Accentable Limited F	Imited Partnership or Limited Liability Partnership suffixes: Limited Partnership,	Limited Partnership, which must include sufflx) Limited, L.P., LP, or Ltd. hited Liability Limited Partnership, L.L.L.P. or LLLP.			
If name unavailable	, name under which the limited partnershi business in Florida; r	p or limited liability limited partnership proposes to re nust contain acceptable suffix.	egister to tra	insact	
2 DELAWARE		3. 03-23-2017			
	ate or Country of Formation	3. 03-23-2017 Date of Formation			
4. Federal Employe	r Identification Number: 30-0976137	41-20-00-00-00-00-00-00-00-00-00-00-00-00-			
5. Name of Register	ed Agent for Service of Process and Flo	orida Street Address:			
CORPORATION SI	ERVICE COMPANY				
1201 HAYS ST.					
TALLAHASSEE, F	1.32301				
6. I hereby accept the of all statutes relating my position as reg	ative to the proper and complete performo sistered agent.	ree to act in this capacity. I further agree to comply ince of my duties, and I am familiar with and accept the	vith the pro se obligation	visions is of	
	Signature	of Registered Agent			
7. Principal Office: 8. Ma		8. Mailing Address:			
700 S. ROSEMARY AVE., STE. 204-129 700 S		700 S. ROSEMARY AVE., STE 204-129			
WEST PALM BEACH, FL 33401 W		WEST PALM HEACH, FL 33401	7771 8		
			_ [3		
9. If limited partnership is a limited liability limited partnership, check box. [.]			23		
10. Name, principal office address, and mailing address of each general partner:			725 227		
Name of General Partner: BRAINSTATION LTD. COFP.		Name of General Partner:	==		
Street Address: 700 S. ROS	700 S. ROSEMARY AVE., STE. 204-1	29 Street Address:	တ်	•	
	WEST PALM BEACH, FL 33401				
Mailing Address: 700 S. ROSEMARY AVE., STE, 204-12 WEST PALM BEACH, FL 33401	29 Mailing Address:				
Name of Genera	ıl Partner:	Name of General Partner:			
Street Address:		Street Address:			
Mailing Addres	S:	Mailing Address:			

Page: 5 of 7

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From: Tara Miller

21000357931

Page 1 of 2

		Name of General Paitner: Street Address:		
Mailing Address:		Mailing Address:		
11. Effective date, if other than the date of filing: DATE OF FILING (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.				
Signed this 22				
The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.				
Filing Fees: Certified Copy (o Certificate of Sta	optional): \$52	·-·		

Page 2 of 2

Page: 6 of 7

21000357931



Page 1

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

DELAWARE, DO HEREBY CERTIFY "BRAINSTATION LP" 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-THIRD DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRAINSTATION LP" WAS FORMED ON THE TWENTY-THIRD DAY OF MARCH, A.D. 2017.

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

6357502 8300

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

Authentication: 204236609

Date: 09-23-21

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BRAINSTATION LP

700 S. Rosemary Ave., Stc. 204-129 West Palm Beach, FL 33401

September 23, 2021

Florida Dept. of State Division of Corporations 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Re: Use of Name "BrainStation Ltd."

To Whom it May Concern:

Please be advised that the undersigned hereby grants consent to the use of the name "BrainStation Ltd." in the State of Florida.

BRAINSTATION LP

By: BrainStation Ltd., General Partner

Name: George Konrad

Title: President