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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077 Fax Number : (845)818-3588

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

Email Address: statenotices@vcorpservices.com

FLORIDA/FOREIGN LP/LLLP Frictionless Capital Fund LP

Certificate of Status 1 Certified Copy Page Count 04

\$1,052.50 Estimated Charge

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Help

S. ROBERTS JUN 17 2022

18886118813

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

Frictionless Capital Fund LP			
(Name of Limited Partnership or Limited Acceptable Limited Partnership suffixes: Limited F Acceptable Limited Liability Limited Partnership st	ed Liability Limited Partnership, which must Partnership, Limited, L.P., LP, or Ltd. uffixes: Limited Liability Limited Partnership, I		
If name unavailable, name under which the limited business i	d partnership or limited liability limited partners in Florida; must contain acceptable suffix.	ship proposes to register to transac	ict
<sub>5</sub> Delaware	3 June 10, 2022		
State or Country of Formation 4. Federal Employer Identification Number. 88-2		mation	
5. Name of Registered Agent for Service of Proce			
Veorp Services, LLC			
1200 South Pine Island Road			
Plantation, FL 33324	_		
6. I hereby accept the appointment as registered ag of all statutes relative to the proper and complet my position as registered agent.	gent and agree to act in this capacity. I further the performance of my duties, and I am familiar v Signature of Registered Agent	agree to comply with the provisto with and accept the obligations of Miriam Nachison - Assistant Secretary	ons f
		20	
7. Principal Office:	8. Mailing Address:	2022 C	
7. Principal Office: 221 SW 12th Street	8. Mailing Address: 221 SW 12th Street	ZOZZ JUN	7
7. Principal Office:	8. Mailing Address:	2022 JUH 17	77
7. Principal Office: 221 SW 12th Street	8. Mailing Address: 221 SW 12th Street	Č.	X 4
7. Principal Office: 221 SW 12th Street Apt. 501	8. Mailing Address: 221 SW 12th Street Apt. 501 Miumi, FL 33130	Č.	
7. Principal Office: 221 SW 12th Street  Apt. 501  Miami, FL 33130  9. If limited partnership is a limited liability lim 10. Name, principal office address, and mailing	8. Mailing Address: 221 SW 12th Street  Apt. 501  Miami, FL 33130  mited partnership, check box.	· · · · · · · · · · · · · · · · · · ·	100
7. Principal Office: 221 SW 12th Street  Apt. 501  Miami, FL 33130  9. If limited partnership is a limited liability lim	8. Mailing Address: 221 SW 12th Street  Apt. 501  Miami, FL 33130  mited partnership, check box.	AM 9: 02	
7. Principal Office: 221 SW 12th Street  Apt. 501  Miami, FL 33130  9. If limited partnership is a limited liability lim 10. Name, principal office address, and mailing Edictionless Capital M	8. Mailing Address: 221 SW 12th Street  Apt. 501  Miumi, FL 33130  mited partnership, check box.   g address of each general partner:  Management ELC  Name of General Partner:	AM 9: 02	
7. Principal Office: 221 SW 12th Street  Apt. 501  Miami, FL 33130  9. If limited partnership is a limited liability lim 10. Name, principal office address, and mailing Name of General Partner:  221 SW 12th Street, Apt. 501	8. Mailing Address:  221 SW 12th Street  Apt. 501  Miami, FL 33130  mited partnership, check box.   address of each general partner:  Management ELC  Name of General Partner:	AM 9: 02	The state of the s
7. Principal Office:  221 SW 12th Street  Apt. 501  Miami, FL 33130  9. If limited partnership is a limited liability lim  10. Name, principal office address, and mailing  Name of General Partner:  Street Address.  221 SW 12th Street, Apt. 501  Miami, FL 33130	8. Mailing Address:  221 SW 12th Street  Apt. 501  Miami, FL 33130  mited partnership, check box.   g address of each general partner:  Management ELC  Name of General Partner:  1 Street Address:	AM 9: 02	
7. Principal Office:  221 SW 12th Street  Apt. 501  Miami, FL 33130  9. If limited partnership is a limited liability lim  10. Name, principal office address, and mailing  Name of General Partner:  Street Address.  221 SW 12th Street, Apt. 501  Miami, FL 33130	8. Mailing Address:  221 SW 12th Street  Apt. 501  Miumi, FL 33130  mited partnership, check box.   g address of each general partner:  Management LLC  Name of General Partner:  1 Street Address:	AM 9: 02	
7. Principal Office:  221 SW 12th Street  Apt. 501  Miami, FL 33130  9. If limited partnership is a limited liability lim  10. Name, principal office address, and mailing Name of General Partner:  Street Address.  221 SW 12th Street, Apt. 501  Miami, FL 33130  Mailing Address  Miami, FL 33130	8. Mailing Address:  221 SW 12th Street  Apt. 501  Miami, FL 33130  mited partnership, check box.   g address of each general partner:  Management ELC  Name of General Partner:  1 Street Address:	AM 9: 02	
7. Principal Office:  221 SW 12th Street  Apt. 501  Miami, FL 33130  9. If limited partnership is a limited liability lim  10. Name, principal office address, and mailing Name of General Partner:  Street Address.  221 SW 12th Street, Apt. 501  Miami, FL 33130  Mailing Address  Miami, FL 33130  Name of General Partner:	8. Mailing Address:  221 SW 12th Street  Apt. 501  Miami, FL 33130  mited partnership, check box.   (address of each general partner:  Management LLC  Name of General Partner:    Mailing Address:	AM 9: 02	

From: Vcorp Services, LLC

## Page 1 of 2

Name of General Partner	r:	Name of General Partner:
Street Address:		Street Address:
Mailing Address:		Mailing Address:
Note: If the date inserted in	than the date of filing	after the date this document is filed by the Florida Department of State.) applicable statutory filing requirements, this date will not be listed as the ecords
12 Attached is a certificate of Florida Department of State, the law of which it is organize	, by the Secretary of State or	ed, not more than 90 days prior to the delivery of this application to the other official having custody of the entity's records in the jurisdiction under
Signed this	day of	,20 22
		logue Jastrunski
	<del></del>	nature of a general partner

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 \$817.155, F.S.

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52,50

Certificate of Status (optional):

\$8.75

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "FRICTIONLESS CAPITAL FUND 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 SEVENTEENTH DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FRICTIONLESS CAPITAL FUND LP" WAS FORMED ON THE TENTH DAY OF JUNE, A.D. 2022.

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

e at corp.delaware.gov/authver.

Authentication: 203711246

Date: 06-17-22