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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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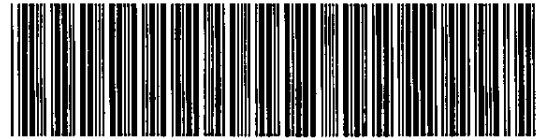
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Date: May 12, 2017

Account#: I20000000088

Name: Michelle Walker

Reference #: T009778

Entity Name: BGSA, INC.

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

**Please retain
original file date.*

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Please include a copy of cover letter with returned evidence. Thanks!

Authorized Amount: \$ 70

Please note: If authorized amount is incorrect,
please call Michelle at 518-213-0737.

Signature: Michelle Walker

④ CORPORATE HQ
COGENCY GLOBAL INC.
10 E 40TH ST, 10TH FL
NY, NY 10016
800.221.0102
+1.212.947.7200

④ EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES
REGISTRY #010772
6 BEVIS MARKS, 18TH FL
LONDON EC3A 7BA
+44 (0)20.3786.1090

④ ASIA PACIFIC HQ
COGENCY GLOBAL (HK) LIMITED
A HONG KONG LIMITED COMPANY
INFINITUS PLAZA, 12TH FL
199 DES VOEUX RD CENTRAL
HONG KONG
+852.3975.1803

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

BGSA, Inc

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 20-2411202
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Delaware 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon Filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 525 S. Flagler Drive, Suite 200, West Palm Beach, FL 33401
(Principal office address)

(Current mailing address, if different)

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

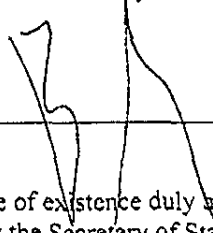
Name: Benjamin Gordon

Office Address: 525 S. Flagler Drive, Suite 200

West Palm Beach 33401
_____. Florida _____
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Benjamin Gordon

Chairman:

525 S. Flagler Drive, Suite 200, West Palm Beach, FL 33401

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

Benjamin Gordon

President:

525 S. Flagler Drive, Suite 200

Address:

West Palm Beach, FL 33401

Vice President:

Address:

Elizabeth Gordon

Secretary:

525 S. Flagler Drive, Suite 200, West Palm Beach, FL 33401

Address:

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.


Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she 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.

Benjamin Gordon, President

13.

(Typed or printed name and capacity of person signing application)

WRITTEN CONSENT GRANTING APPROVAL FOR USE OF NAME

BGSA, LLC., a Delaware limited liability company (the "**Consenting Party**"), formed on June 12, 2006 and qualified to do business in Florida on June 12, 2006, does hereby grant permission and approves the filing of the Application by Foreign Corporation for Authorization to Transact Business in Florida of BGSA, Inc. There is common ownership among the entities.

The undersigned, being the sole member of the Consenting Party has executed this Written Consent Granting Approval for Use of Name on behalf of the Consenting Party this 11th day of May, 2017.

BGSA, LLC,
a Delaware limited liability company.

By: Benjamin Gordon, Member

STATE OF FLORIDA)
) SS:
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 11th day of May, 2017, by BENJAMIN GORDON, as sole member of BGSA, LLC, a Delaware limited liability company. Said individual personally appeared before me and

☒ is personally known to me [or]

☐ produced _____ as identification.

[NOTARIAL SEAL]

Notary Public, State of Florida
Print Name: Beatriz Stein
My Commission Expires: 4/7/2020
Commission Number: FF 979924



Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BGSA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BGSA, INC." WAS INCORPORATED ON THE FOURTH DAY OF MAY, A.D. 2017.

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

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202490539

Date: 05-05-17