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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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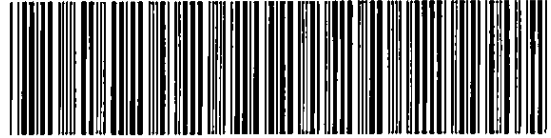
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 MAY 25 AM 8:52

FILED

18 MAY 24 AM 8:27

SECRETARY OF STATE  
HALL OF RECORDS

K SALY

MAY 25 2018

# SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 5/24/2018

**\*\*WALK IN\*\***

ENTITY NAME TEMPLAR ADVISORS NORTH AMERICA GP, INC.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED 78.75

CHECK # 4863

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

**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.*

Templar Advisors North America GP, 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. New York 3. 82-2978904  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. September 18, 2017 5. Perpetual  
(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. 500 Fifth Avenue, Suite 2440, New York, NY 10010  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: United Corporate Services, Inc.

Office Address: 9200 South Dadeland Blvd., Ste. 508

Miami 33156  
(City) (Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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.*

Michael A. Barr, President

(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Charles Garnett  
Chairman: \_\_\_\_\_  
500 Fifth Avenue, Suite 2440, New York NY 10010  
Address: \_\_\_\_\_

James Patrick  
Vice Chairman: \_\_\_\_\_  
500 Fifth Avenue, Suite 2440, New York NY 10010  
Address: \_\_\_\_\_

Hugo Jackson  
Director: \_\_\_\_\_  
500 Fifth Avenue, Suite 2440, New York NY 10010  
Address: \_\_\_\_\_

Joseph Bikari  
Director: \_\_\_\_\_  
500 Fifth Avenue, Suite 2440, New York NY 10010  
Address: \_\_\_\_\_

B. OFFICERS

Charles Garnett  
President: \_\_\_\_\_  
500 Fifth Avenue, Suite 2440, New York NY 10010  
Address: \_\_\_\_\_

N/A  
Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Charles Garnett  
Secretary: \_\_\_\_\_  
500 Fifth Avenue, Suite 2440, New York NY 10010  
Address: \_\_\_\_\_

Charles Garnett  
Treasurer: \_\_\_\_\_  
500 Fifth Avenue, Suite 2440, New York NY 10010  
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.

Charles Garnett, Director and President

13. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

**State of New York  
Department of State } ss:**

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SECRETARY OF STATE  
100 WATER STREET FLOOR 10

I hereby certify, that the Certificate of Incorporation of TEMPLAR ADVISORS NORTH AMERICA GP, INC. was filed on 09/18/2017, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

I further certify that no other documents have been filed by such corporation.



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 22nd day of May  
two thousand and eighteen*

Brendan W. Fitzgerald  
Executive Deputy Secretary of State

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