	Requestor's Name)	
· · · · · · · · · · · · · · · · · · ·	Address)	
	,	
	(Address)	
	· · · · · · · · · · · · · · · · · · ·	
	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer	
,	J	

Office Use Only



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2020 OCT 30 PM 2: 02

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2028 OCT 30 RM 8: 47

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 492847// 2/4803290

AUTHORIZATION : $O \setminus$

COST LIMIT : \$ 520.00

ORDER DATE: October 30, 2020

ORDER TIME : 12:22 PM

ORDER NO. : 492847-005

CUSTOMER NO: 4803290

FOREIGN FILINGS

NAME: BAYPORT FINANCIAL SERVICES

(USA), INC.

XXXX QUALIFICATION (TYPE: CQ)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

COVER LETTER

10:	Registration Division of	Section Corporations					
SUBJ	ЕСТ ∙ Ваур	ort Financial Services (USA), Inc.				
130130		Name	of corporation	on - must in	clude suffix		·
Dear S	ir or Madam:	:					
"Certif	icate of Exist	ication by Foreign Co tence," or "Certificate reign corporation to t	of Good Sta	anding" and	l check are sul		
Please	return all cor	respondence concern	ing this matt	er to the fol	llowing:		
			Pablo Mo	ontesano			
			Name o	t Person			-1.2
		В	ayport Financial	Services (USA	A) Inc.		
			Firm/Co	mpany			<u> </u>
			2665 S Baysh	ore Dr., Suite	805		
			Add	ress		<u>.</u>	
			Coconut	Grove, 33133	FL		
			City/State	and Zip co	de		
marnus	k@bayporttīna	ance.com					
	<u>.</u>	E-mail address	: (to be used	for future	annual report	notification)	
For tur	ther informat	ion concerning this m	atter, please	call:			
	Pablo I	Montesano	at (786)	614 - 87	23	
	Name of Po	erson	Area Co	de I	Daytime Telep	hone Number	
	Registration Division of The Centre	Corporations of Tallahassee onroe Street, Suite 810			MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	
Please n		for the following amo yable to: FLORIDA DI e	EPARTMEN g Fee &		Filing Fee &		iling Fee, ite of Status & I Copy

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.

1	al Services (USA), Inc. orporation: must include "INCORPORATED	· · · ·	"COMBANIX" "CODDODATION!"	-			
	orporation; must include TNCORPORATEL orp.," "Inc.," "Co.," or "Corp.,")	J.	COMPANY. CORPORATION.				
				-			
(If name unavaila	able in Florida, enter alternate corporate nam	ie a	dopted for the purpose of transacting business in Florida)				
2. Delaware	3	3	35255690	_			
(State or country	y under the law of which it is incorporated)		(FEI number, if applicable)				
4. 2016/03/09	5	5.	Perputual				
(Date of incorporation)			(Date of duration, if other than perpetual)				
6. October 2017							
o			Florida, if prior to registration)	•			
		150	22. F.S., to determine penalty liability)				
7. 2665 S Bayshore	Drive Suite 805, Miami, Florida, 33133			_			
		ffic	e <u>street</u> address)				
2665 S Bayshore	Drive Suite 805, Miami, Florida, 33133						
	(Current mail	ling	address, if different)				
			Box NOT acceptable) ACC 30 ACC 30				
8. Name and stree	t address of Florida registered agent: (P.	Ο.	Box NOT acceptable)				
Name:	Corporation Service Company		ကြီး မြ				
, verifica	1201 Hays Street		** 1 y	1			
Office Address:	1201 Hays Succe						
	Tallahassee		, Florida 32301				
	(City)		(Zip code)				
0 B 1	ent'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.

Corporation Service Company
By: Squdyl
(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.

A. DIRECTORS Stephen Forbes Williamson Pablo Montesano Name: □Chairman Name: □ Chairman 3 Alice Lane 175 Morningside Dr ☐ Vice Chairman Address: □Vice Chairman Address: Sandown, Sandton, 2193 Coral Gables □Director □ Director FL33133 South Africa ■ President □President □Vice President ■ Vice President ☐ Treasurer ☐ Treasurer □ Secretary ■ Secretary □ Other _____ □ Other _____ □ Other _____ ☐Other _____ Warren Abbey □ Chairman Name: □Chairman Name: Address: ___ □Vice Chairman Address: □Vice Chairman Apartment PH1 ■ Director □ Director Miami □ President □President FL 33131 □ Vice President □Vice President □ Secretary ☐Treasurer □ Secretary □ Treasurer ☐ Other _____ □ Other ______ □Other _____ □ Other _____ Name: Name: ☐ Chairman □ Chairman □Vice Chairman Address: □Vice Chairman Address: □Director □ Director □President □President □ Vice President ☐ Vice President □ Secretary ☐ Treasurer □ Secretary □Treasurer □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. 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.



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

DELAWARE, DO HEREBY CERTIFY "BAYPORT FINANCIAL SERVICES (USA),

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 THIRTIETH DAY OF

OCTOBER, A.D. 2020.

AND I DO MEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BAYPORT FINANCIAL SERVICES (USA), INC." WAS INCORPORATED ON THE NINTH DAY OF MARCH, A.D. 2016.

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

Authentication: 203975379

Date: 10-30-20