

L02000017868

Athena Risk Advisors LLC
PO Box 14304
Ft Lauderdale FL 33302

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/18/03--01017--003 **70.00

09/16/03--01002--015 **55.00

12/9/17

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DIVISION OF CORPORATIONS
03 SEP 16 PM 2:05

JP

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Athena Risk Advisors LLC
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mel J. Meinhardt
(Name of Person)

Athena Risk Advisors
(Firm/Company)

~~PO Box~~ 350 East Las Olas Blvd, 17th Floor
(Address)

Fort Lauderdale, FL 33301
(City/State and Zip code)

W03-23 988

For further information concerning this matter, please call:

Mel Meinhardt at (786) 374-3297
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 22, 2003

MEL J. MEINHARDT
ATHENA RISK ADVISORS, LLC
350 EAST LAS OLAS BLVD, 17TH FLOOR
FORT LAUDERDALE, FL 33301

SUBJECT: ATHENA RISK ADVISORS, LLC
Ref. Number: W03000023988

We have received your document for ATHENA RISK ADVISORS, LLC and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$55.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a corporation, but your entity is a . Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 603A00047675

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Athena Risk Advisors LLC

8 September 2003

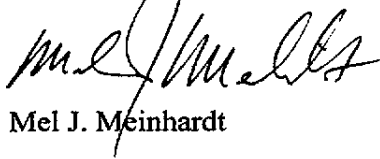
Lee Rivers
Division of Corporations
Florida Department of State
PO Box 6327
Tallahassee FL 32314

Subject: Athena Risk Advisors LLC
Ref Number: W03000023988

Thank you for your clarification on the proper form for our application. I have enclosed the form for the LLC and a check for the \$55.00 balance of the fee due, per your instructions. The total fee is \$125.00.

Please contact me with further instructions or questions if any.

Best regards,



Mel J. Meinhardt

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Athena Risk Advisors LLC
(Name of foreign limited liability company)
2. Delaware USA
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 06-1682087
(FEI number, if applicable)
4. 10 March 2003
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 350 East Las Olas Blvd, 17TH Floor, Fort Lauderdale FL 33301

(Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☒
9. The name and usual business addresses of the managing members or managers are as follows:
Athena Risk Advisors, Ted Gutierrez
350 East Las Olas Blvd, 17TH Floor, Fort Lauderdale FL 33301
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Investment
management services to portfolio companies

Mel J Meinhardt

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Mel J. Meinhardt

Typed or printed name of signer

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DIVISION OF CORPORATIONS
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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Athena Risk Advisors LLC

2. The name and the Florida street address of the registered agent and office are:

Mel J. Meinhardt

(Name)

350 East Las Olas Blvd. 17th Floor, Fc

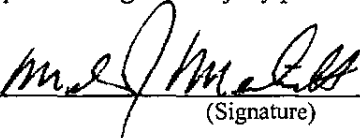
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Fort Lauderdale FL 33301

(City/State/Zip)

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Delaware

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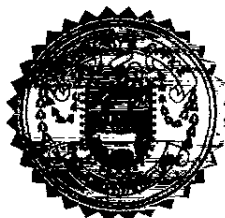
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ATHENA RISK ADVISORS, LLC" 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 FIFTH DAY OF AUGUST, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATHENA RISK ADVISORS, LLC" WAS FORMED ON THE TENTH DAY OF MARCH, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3634319 8300

AUTHENTICATION: 2565986

030510886

DATE: 08-05-03