

M05000005898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

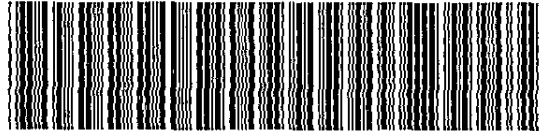
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

BK

Office Use Only



900060521219

FILED
05 OCT 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
05 OCT 20 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 662148 4804708

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 125.00

ORDER DATE : October 20, 2005

ORDER TIME : 9:48 AM

ORDER NO. : 662148-015

CUSTOMER NO: 4804708

FILED
05 OCT 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: ANCHOR POINT CAPITAL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Pollye Janisse -- EXT# 2954

EXAMINER: _____

**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. Anchor Point Capital, LLC

(Name of foreign limited liability company)

2. Delaware

(Jurisdiction under the law of which foreign limited liability
company is organized)

3. 20-2960865

(FEI number, if applicable)

4. June 3, 2005

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to exist
or "perpetual")

6. October 24, 2005 (anticipated date)

(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 255 Alhambra Circle, Suite 425

Coral Gables, Florida 33134-7400

(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:

Timothy J. Crowe

255 Alhambra Circle, Suite 425, Coral Gables, Florida 33134-7400

Albert Hsu

10 Rockefeller Plaza, 16th Floor, New York, New York 10020

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: To engage in any and all lawful business activities as provided and permitted by the state of Florida.


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.)

Timothy J. Crowe, Managing Member

Typed or printed name of signee

05 OCT 20 PM 3:00
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 Company is:

Anchor Point Capital, LLC

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

Timothy J. Crowe

(Name)

255 Alhambra Circle, Suite 425

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

Coral Gables, Florida 33134-7400

City/State/Zip

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 appointments 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 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

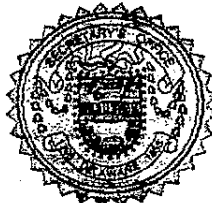
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANCHOR POINT CAPITAL, 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 TWENTIETH DAY OF OCTOBER, A.D. 2005.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANCHOR POINT CAPITAL, LLC" WAS FORMED ON THE THIRD DAY OF JUNE, A.D. 2005.



3975793 8300

050855734

Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4237775

DATE: 10-20-05