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Office Use Only



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COVER LETTER

Registration Section
Division of Corporations

Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limite liability company to transact business in Florida Please return all correspondence concerning this matter to the following: Call Tabaccaa	SUBJECT:	BigSur	Wealth	Management	LLC
Big Sur Wealth Manage ment Luc (Firm/Company)		0	(Name of Lim	ited Liability Company)	
Rasal Ir. Sassen (Name of Person) BigSur Wealth Management Luc (Firm/Company) Address) Management Luc (Firm/Company) (Address) For further information concerning this matter, please call: Rasal Ir. Sassen (Name of Person) (Area Code & Daytime Telephone Number) MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: S125.00 Filing Fee MS130.00 Filing Fee & S160.00 Filing Fee, Certificate	Florida," Certifi	icate of Existence	e, and check are su		
Big Sur Wealth Manage ment Luc (Firm/Company)	Please return all	l correspondence	concerning this m	natter to the following:	
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(City/State and Zip Code) For further information concerning this matter, please call: City/State and Zip Code	_	BigSur	Wealth (Fir	m/Company)	LLC
For further information concerning this matter, please call: Column	الــ	00 FE16	rickell A	<u>√e. # 1404</u> (Address)	
Rafael Tchacce at (344) 384-3830 (Name of Person) (Area Code & Daytime Telephone Number) MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: \$125.00 Filing Fee & \$160.00 Filing Fee, Certificate		Miani	(City/Sta	ate and Zip Code)	
(Name of Person) MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: \$\Begin{array} \text{STREET ADDRESS:} \\ \text{Division of Corporations} \\ \text{Clifton Building} \\ \text{2661 Executive Center Circle} \\ \text{Tallahassee, FL 32301} Enclosed is a check for the following amount: \$\Begin{array} \text{S130.00 Filing Fee } \Begin{array} \text{S130.00 Filing Fee } \text{S130.00 Filing Fee } \text{S155.00 Filing Fee } \text{S160.00 Filing Fee, Certificate} \end{array}	For further info	rmation concernit	ng this matter, ple	ase call:	
Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 Enclosed is a check for the following amount: \$\Begin{align*} \text{S130.00 Filing Fee} \text{S130.00 Filing Fee} \text{S155.00 Filing Fee} \text{S160.00 Filing Fee}, Certificate	Ras	Name of I	erson)	at (<u>347</u>) <u>384</u> (Area Code & Daytime	- 3830 e Telephone Number)
\$125.00 Filing Fee \$\sum \\$130.00 Filing Fee & \sum \\$155.00 Filing Fee & \sum \\$160.00 Filing Fee, Certificate	Division P.O. Box	of Corporations x 6327		Division of Corporations Clifton Building 2661 Executive Center Ci	rcle
Certified Copy of Status & Certified Copy]\$160.00 Filing Fee, Certificate of Status & Certified Copy

ÁPPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 06-1397746 (FEI number, if applicable)
4. Obate of Organization) 5. Perceloa (Duration: Year limited liability company will cease to exist or "perpetual")
6. May not get transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 2127 Brickell Dre. # 1404
Miami, FL 33139 (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?
BigSur Partners LLC 2127 Brichell Ave. # 1404
2127 Brichell Ave. # 1404
Miam, FL 33129
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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Financial
- Avisor
Signature of a member of 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.)
RAFAEL IRIBARREN

Typed or printed name of signee

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:
BigSur Wealth Manage ment LLC
If name unavailable, the alternate name to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
(20, 7.0)
Grizel Gil (Name)
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Coral Gables FL 33134 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 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, Florida Statutes.

(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 "BIGSUR WEALTH MANAGEMENT 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 TWENTY-NINTH DAY OF NOVEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIGSUR WEALTH MANAGEMENT LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF OCTOBER, A.D. 2007.

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

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ATTUENDED TO STATE OF STATE OF STATE

DATE: 11-29-07

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