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(Requestor's Name)				
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. (City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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C. LEWIS

Jan. 4 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 11, 2009

JEAN-CHRISTOPHE FOUQUET / KFF, LLC 209 N. LATITUDE CIRCLE DELRAY BEACH, FL 33483

SUBJECT: KAPITAL FOREX INVESTMENTS, LLC

Ref. Number: W09000053969

We have received your document for KAPITAL FOREX INVESTMENTS, LLC and check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following reason(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

If you have any further questions concerning your document, please call (850) 245-6047.

Letter Number: 809A00037866

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: KAPITAL FOREX INVESTMENTS,LLC				
	Name of Limited Liability Company			
The enclosed "A Existence, and o	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please return all	correspondence concerning this matter to the following:			
	JEAN-CHRISTOPHE FOUQUET			
	Name of Person			
KFF,LLC				
	Firm/Company			
	209 N. LATITUDE CIRCLE			
	Address			
	•			
	DELRAY BEACH, FL 33483			
	City/State and Zip Code			
JC@KAPITALFX.COM				
	E-mail address: (to be used for future annual report notification)			
For further info	rmation concerning this matter, please call:			
<u>J</u>	EAN-CHRISTOPHE FOUQUET at (561) 350-9990			
	Name of Person Area Code & Daytime Telephone Number			
Divisio Registi P.O. B	ING ADDRESS: on of Corporations ration Section ox 6327 cassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a	check for the following amount:			
\$12	5.00 Filing Fee \$\int \text{\$130.00 Filing Fee & Certificate of Status}\$\$ \$155.00 Filing Fee & \int \text{\$\subset\$}\$\$ \$\$ \$\$ \$160.00 Filing Fee, Certificate of Status & Certified Copy}\$\$			

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

	MITEL LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLURIDA:	
1.	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
cor	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wrasent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C," "LLC.")	
2.	DELAWARE 3. 27-0885421 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
(company is organized)	
4.	09/03/09 5. PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to	
	Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")	
6.		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
	2711 CENTERVILLE ROAD, SUITE 400, WILMINGTON, DELAWARE, 19808	
	(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:	
	KFF, LLC	
	209 N. LATITUDE CIRCLE	
	DELRAY BEACH, FL 33483	
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, and inslation of the certificate under oath of the translator must be submitted.)	ds in
11	. Nature of business or purposes to be conducted or promoted in Florida: INVESTMENTS	
	- AAR	
		T 3
	Signature of a member or an authorized representative of a member. (In accordance with action 608.408(3), F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)	=
	JEAN-CHRISTOPHE FOUQUET	TT [†]
	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:						
KAPITAL FOREX INVE	STMENTS, LLC					
If unavailable, the alternate to be used in the state of Florida is:						
2. The name and the Florida street address of the reg	istered agent and office are:					
JEAN-CHRISTOP						
209 N. LATITUI Florida Street Address (P.O.						
DELRAY BEACH,	DP -					

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.

(Signatur)

\$ 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, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "KAPITAL FOREX INVESTMENTS, 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-EIGHTH DAY OF DECEMBER, A.D.

2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KAPITAL FOREX INVESTMENTS, LLC" WAS FORMED ON THE THIRD DAY OF SEPTEMBER, A.D. 2009.

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

4727153 8300

091139546

Jeffrey W. Bullock, Secretary of State AUTHENT CATION: 7724216

DATE: 12-28-09

You may verify this certificate online at corp.delaware.gov/authver.shtml