M11000004196

(Re	questor's Name)		
(Ad	dress)		
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(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 2, 2011

SHAABANI MUNRO 8400 NW 36TH ST, SUITE 220 MIAMI, FL 33166

SUBJECT: CGI MERCHANT PARTNERS, LLC

Ref. Number: W11000040465

We have received your document for CGI MERCHANT PARTNERS, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 011A00018160

COVER LETTER

TO:	Registration Section
	Division of Corporation

SUBJECT:	CGI	Merchant Partners, LLC
		Name of Limited Liability Company

	ry for Authorization to Transact Business in Florida," Certificate of sed foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following	lowing:
Shaabani Munro	
Name	of Person
CGI Merchant Partners, LLC	
	Company
8400 NW 36th St, Suite 220	in the second se
Ac	idress
Miami, FL 33166	Idress SECSE AUG.
City/State	and Zip Code
smunro@cgimb.com	
E-mail address: (to be used for For further information concerning this matter, please call:	future annual report notification)
Shaabani Munro	_{t (} 786) 581-4800
Name of Person Area Co	de & Daytime Telephone Number
Division of Corporations Registration Section P.O. Box 6327 Division of Registration Registration Clifton Bui	lding ative Center Circle
	5.00 Filing Fee & \$\int\\$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 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CGI Merchant Partners, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C	C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and consent of the managers or managing members adopting the alternate name. The alternate name must inc Company," "L.L.C," "LLC.")	attach a copy of the written clude "Limited Liability
2. State of Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applications of applications of the law of which foreign limited liability company is organized)	able)
4. 2/28/2011 (Date of Organization) 5. Perpetual (Duration: Year limited liability comexist or "perpetual")	npany will cease to
6. Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	70
7. 8400 NW 36th St, Suite 220	AUG II
Miami, FL, 33166 (Street Address of Principal Office)	EC. FLORING TO THE PERSON OF T
8. If limited liability company is a manager-managed company, check here 🗹	RIDA
9. The name and usual business addresses of the managing members or managers are as	
MGRM: CGI Merchant, LLC, 8400 NW 36th St, Suite 220, Miami,	FL, 33166
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in 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: Asset Ma	anagement
Signature of a member or an authorized representative of a memb	
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation penalties of perjury that the facts stated herein are true. I am aware that any false information document to the Department of State constitutes a third degree fellow as provided for in	submitted in a

Typed or printed name of signee

Shaabani Munro

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:		
CGI Morchant Partners, LC		
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:		
Shcabani Munro (Name)	BALL AUG 17 SECGE TARI	The second
	ட்டு டு ————————————————————————————————————	r T
Syco NOW 36 St. Swift 220 Florida Street Address (P.O. Box NOT ACCEPTABLE)	PH 12: 38 OF STATE E. FLORIDA	7 M
Miamis EL 3316la	> 6	
Miami, FL, 33166 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)



PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "CGI MERCHANT PARTNERS, 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. 2011.

4946308 8300

110895503

Jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 8953847

DATE: 08-05-11

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