

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : NRAI SERVICES, LLC

Account Number : I20080000104 Phone : (302) 674-4089

Fax Number : (302)674-5266

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please."

Foreign Limited Liability Company Bleu Lion, LLC

ertificate of Status Certified Copy Page Count 03 **Estimated Charge** \$130.00

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

IN COMPLIANCE WITH SECTION FOR SOIL FLORIDA STATETIES THE ROLLOWING

Ľ	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	XXXXXXXX	A PUN	E.C.H
l.	Bleu Lion, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	<u>"LLC.")</u>		
CO	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach insent of the managers or managing members adopting the alternate name. The alternate name must include "lompany," "L.L.C," "LLC.")	a copy o	f the w	ritten y
2.	Delaware 3, 38-3888139			
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)			
4 .	October 2, 2012 5 perpetual			
	(Date of Organization) (Duration: Year limited liability company exist or "perpetual")	will ceas	c to	
6.				
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	· ef		
7.	715 82nd Street	J= (1)	222	
	Miami Beach FL 33141	至黑	139	٠
	(Street Address of Principal Office)	SS	ī	ŧ
8.	If limited liability company is a manager-managed company, check here	X OF	8 AH	
9.	The name and usual business addresses of the managing members or managers are as follows:	7 CM	3	i
	Bleu Lion Holdings, LLC	Şm	N	
	715 82nd Street		——	
	Miami Beach FL 33141			
the tra	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign restation of the certificate under eath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: Real Estate			ds in
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), P.S., the execution of this document constitutes an affirmation und			
	penalties of perjury that the facts stated herein are true. I am aware that any false information submit document to the Department of State constitutes a third degree felony as provided for in \$.817.		.)	

Typed or printed name of signee

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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.

	the alternate to be used in a different that the Florida street address.	the state of Florida is: ss of the registered agent and office a	irc:
. The name ar		ss of the registered agent and office a	irc:
. The name ar		ss of the registered agent and office a	ire:
	NRAI Services, Inc.		
		(Name)	SE!
	515 East Park Aver	nue	CIRE II
		Address (P.O. Box NOT ACCEPTABLE)	TAR)
	Tallahassee	_{EI} 32301	
	Tanariassee	FL 32301 City/State/Zip	
ability compar gent and agree elating to the p bligations of n	ny at the place designated in the to act in this capacity. If the proper and complete perform ny position as registered agonals. NRAI Services, Inc. By:	nd to accept service of process for the of this certificate, I hereby accept the after the agree to comply with the provisionance of my duties, and I am familiar tent as provided for in Chapter 608, Flagnature)	ppointment as registere ions of all statutes with and accept the

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\$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BLEU LION, 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 THIRD DAY OF OCTOBER, A.D. 2012.

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 "BLEU LION, LLC" WAS FORMED ON THE SECOND DAY OF OCTOBER, A.D. 2012.

SECRETARY OF STATE

5221446 8300

121090538

You may verify this certificate unline at corb.delaware.gov/authvoz.ahtml Jaffrey W. Bullock, Secretary of State

DATE: 10-03-12