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To: Division of Corporations Fax Number : (850)617-6363	AHASSEE
From: Account Name : NRAI SERVICES, LLC Account Number : I20080000104 Account Number : I20080000104 H Du Fax Number : (302)674-4089 Au Co Account Number : (302)674-5266 Au Co Account Number : (302)674-5266 Account	
2 Breail Address: <u>elad Coster @ gmail</u>	-
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#### H12000244726 3

### 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. Bleu Lion Management Services, 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.	(Jurisdiction under the law of which foreign limited liability company is organized)	3.	80-08555597 (FEI number, if	applicable)
4,	October 2, 2012 (Date of Organization)	5.	perpetual (Duration: Year limited liabi exist or "perpetual")	lity company will cease to
6.	(Date first transacted business in F (See sections 608.501 & 608.502 F.	lari S. ti	ida, if prior to registration.) o determine penalty liability)	LEO OT -
7.	715 82nd Street			SSI O
	Miami Beach FL 33141 (Street Address	5 01	Principal Office)	
0	fflimited lighility commence is a manager master			

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:

Bleu Lion Management Holdings, LLC

715 82nd Street

Miami Beach FL 33141

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 ceth of the translation must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida; Real Estate



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 penaltics of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

ELAD KOHEN

Typed or printed name of signee

H12000244726 3

10/08/2012 15:27 FAX 3026745266

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## H12000244726 3

# 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:

## Bleu Lion Management Services, LLC

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:

NRA	Services,	Inc.	
			_

(Namo)

515 East Park Avenue Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL 32301

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. NRAI Services, Inc.

By: Signature

- \$ 100.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

10/08/2012 15:27 FAX 3026745266

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLEU LION MANAGEMENT SERVICES, 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 SAID "BLEU LION MANAGEMENT SERVICES, LLC" WAS FORMED ON THE SECOND DAY OF OCTOBER, A.D. 2012.

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



tary of State AUTHENI TION: 9890361

DATE: 10-03-12

5221445 8300

121090529 Ou may verify this certificate onli t corp.delaware.gov/authwer.shtml