M1200005867

Office Use Only

B. KOHR

OCT 19 2012

EXAMINER



900240790729

10/18/12--01006--017 **125.00



COVER LETTER

TO:

Registration Section

Name of Limited Liability Company
Name of Emined Elability Company
plication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of eck are submitted to register the above referenced foreign limited liability company to transact business in Florida
orrespondence concerning this matter to the following:
Abdul Mathin
Name of Person
Firm/Company
1803 Park Center Drive, Suite 200
Address PC 2
Orlando, FL 32835
City/State and Zip Code amathin@optimafl.com E-mail address: (to be used for future annual report notification)
amathin@optimafl.com
E-mail address: (to be used for future annual report notification)
nation concerning this matter, please call:
Mathin at (321) 695-2324
Name of Person Area Code & Daytime Telephone Number
IG ADDRESS: STREET ADDRESS: of Corporations Division of Corporations
ion Section Registration Section
Clifton Building See, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

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:

BlackMINE Fund Management, LLC	
(Name of Foreign Limited Liability Company; must inclu	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpo consent of the managers or managing members adopting the alte Company," "L.L.C," "LLC.")	se of transacting business in Florida and attach a copy of the writte rnate name. The alternate name must include "Limited Liability
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
	_{5.} Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	orida, if prior to registration.) to determine penalty liability)
7. 1803 Park Center Drive, Suite 200	
Orlando, FL 32835	ETC TO THE SECOND SECON
(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 man	aging members or managers are as follows:
The BlackMINE Group, LLC	
5012 Latrobe Drive	
Windermere, FL 34786	
10. Attached is an original certificate of existence, no more than 90 of the jurisdiction under the law of which it is organized. (A photocoptranslation of the certificate under eath of the translator must be subr	
11. Nature of business or purposes to be conducted or	promoted in Florida: Engage in any
lawful act or activity	
Signature of a member or an au	thorized representative of a member.
penalties of perjury that the facts stated herein are tru	eution of this document constitutes an affirmation under the are. I am aware that any false information submitted in a s a third degree felony as provided for in s.817.155, F.S.)
H37	DUL MATTHIN.
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 Lim	ited Liability Company is:
BlackMINE Fund	d Management, LLC
If unavailable, the altern	ate to be used in the state of Florida is:
2. The name and the Flo	orida street address of the registered agent and office are:
Abdul N	Mathin Mathin
	(Name)
1803 F	Park Center Drive, Suite 200
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
Orland	do _{FL} 32835
	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.

\$ 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



State of Belaware

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 898 DOVER, DELAWARE 19903 120989869

9914073 ABDUL MATHIN 1803 PARK CENTER DRIVE SUITE 200 ORLANDO 10-03-2012

FL 32835

AMOUNT	ORSCRIPTION
	BLACKMINE FUND MANAGEMENT, LLC 5196432
400.00	Franchise Tax Paid by Agent
400.00	FILING TOTAL
180.00 70.00 40.00 150.00	BLACKMINE FUND MANAGEMENT, LLC 5196432 0265 Conv & form (Non-Corp) Conversion Fee Formation Fee Court Municipality Fee, Wilm. Expedite Fee, 24 Hour
440.00	FILING TOTAL
840.00	TOTAL CHARGES
860.70	TOTAL PAYMENTS
20.700	CHARGED TO ACCOUNT
	,
A 189	
1,911	

State of Delaware Secretary of State Division of Corporations Delivered 05:45 PM 08/30/2012 FILED 05:45 PM 08/30/2012 SRV 120989869 - 5196432 FILE

STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A CORPORATION TO A LIMITED LIABILITY COMPANY PURSUANT TO SECTION 18-214 OF THE LIMITED LIABILITY ACT

			M. Maria	
2.) The juris	diction immediately	prior to filing this Ce	rtificate is D	elaware .
	The second of th			
	the corporation first	formed is August	9, 2012	

1.) The jurisdiction where the Corporation first formed is Delaware

5.) The name of the Limited Liability Company as set forth in the Certificate of

Formation is BlackMINE Fund Management, LLC

4.) The name of the Corporation immediately prior to filing this Certificate is

BlackMINE Fund Management Corp

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the day of August , A.D. 2012

Authorized Person

Name: Jeffrey D Barton

Print or Type

State of Delaware Secretary of State Division of Corporations Delivered 05:45 PM 08/30/2012 FILED 05:45 PM 08/30/2012 SRV 120989869 - 5196432 FILE

STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of FORMATION

	ird: (Insert any other matters the members determine to include herein.)
	The name of its Registered agent at such address is The Corporation Trust Company
	Zip Code 19801 .
	cond: The address of its registered office in the State of Delaware is 1209 Orange Street in the City of Wilmington
. 6	

Name: Jeffrey D Barton
Typed or Printed