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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE

MAR 18 2013 D. BRUCE

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2013

MATTHEW A. LAPIDES 615 SANTANDER AVENUE, SUITE A CORAL GABLES, FL 33134

SUBJECT: GLOBAL ALLIANCE INVESTMENT MANAGEMENT LLC

Ref. Number: W13000013042

We have received your document for GLOBAL ALLIANCE INVESTMENT MANAGEMENT LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant of 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 90 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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 613A00005165

www.sunbiz.org

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COVER LETTER

TO:

Registration Section **Division of Corporations**

Global Alliance Investment Management LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence con	cerning this matter to the	following:			
Matthew	A. Lapides				
	Na	me of Person			
Global A	lliance Inves	stment Ma m/Company	anagemen	t LLC	
615 San	tander Aven	ue, Suite	A		
		Address	:	•	
Coral Ga	bles, FL 33	3134		2013 S.E.C.	
***************************************	•	ate and Zip Code		3 MAR CRET	
mlapides	@globaladv	isorallian/	ice.com	· ∴ ∴ ∴)
E	mail address: (to be used	for future annual rep	port notification)	<u>%</u>	<u> </u>
For further information concerning to	his matter, please call:			PH 5	in the second
Matthew Lap		_at (305)	428-2689	STATE LORIDA	leanne de
Name of	Person Area	Code & Daytime To	elephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divisior Registra Clifton 2661 Ex	T ADDRESS: n of Corporations ation Section Building secutive Center Circ see, FL 32301	le		
Enclosed is a check for the fol □ \$125.00 Filing Fee □	lowing amount: 3 \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy		Filing Fee, Certifica s & Certified Copy	ıte

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 BY SINESS IN THE STATE OF FLORIDA

1.	Global Alliance Investment Management, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	(Name of Poteign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of "LLC.")
ÇOI	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written asent 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 46-1101721
Ī	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
4.	09/28/2012
••	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	NA
•	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	615 Santander Avenue, Suite A, Coral Gables, FL 33134
	(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:
	Matthew Lapides, 615 Santander Avenue, Suite A, Coral Gables, \$\frac{1}{2} 33134
	DA DA
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida:
	Investment advisory services and support services for investment advisor representative
	Maximus Lander
	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
	penalties 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.)

Typed or printed name of signee

Matthew A. Lapides

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 Emitted Elability Company	The name of the Limited Liability Company	V 1:	IS
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Global Alliance Investment Management, 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:

Matthew A. Lapid	des	•	
	(Name)	20 IA	
615 Santander A	venue, Suite A	2019 MAR SECRET	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		R 15 R 15 ASSE	The same
Coral Gables	_{FL} 33134	OF S	
	City/State/Zip	S: 00	at mark

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)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "GLOBAL ALLIANCE INVESTMENT

MANAGEMENT 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 THIRTEENTH DAY

OF MARCH, A.D. 2013.

5219857 8300

130310601

AUTHENT CATION: 0281602

DATE: 03-13-13

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