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September 18, 2013

Privileged & Confidential Via First Class Mail

Division of Corporations Registration Section PO Box 6327 Tallahassee, FL 32314

Re: Application by Foreign LLC for Authorization to Transact Business in Florida for Topside Financial, LLC

To Whom This May Concern,

Enclosed for your review and execution is the Application by Foreign LLC for Authorization to Transact Business in Florida for Topside Financial, LLC, a Certificate of Compliance from the Alaska Secretary of State, and check #4807 in the amount of \$125.00. Please do not hesitate to contact me at (312) 263-8600 regarding any questions you may have.

Best regards,

DUGGAN BERTSCH, LLC

dammille

Amanda M. Miller

AMM/slf Encl. CR2E027 (9/10)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Topside Financial, 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 concerning this matter to the following:

Amanda Miller					
Name of Person					
DUGGAN BERTSCH, LLC					
Firm/Company					
303 West Madison Street, Suite 1000					
Address					
Chicago, IL 60606					
City/State and Zip Code					
dlittwin@dugganbertsch.com					

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Am	an	da	Mi	ller
, ,,,,	\sim	\sim		

,,312 \ 263-8600

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$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

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	STATE OF FLORIDA:
1 Topside Financial, 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	
consent of the managers or managing members adopting the alterna Company," "L.L.C," "LLC.")	te name. The alternate name must include "Limited Liability
	46-3543705
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. August 30, 2013	Perpetual Fig. 3
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
_{6.} Upon registration	P 2
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	dotomino nonalty lighility)
_{7.} 1080 Skye Lane	FLORING PERSONNEY)
Palm Harbor, FL 34683	0A - 8
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	ompany, check here
9. The name and usual business addresses of the manag	ing members or managers are as follows:
Lawrence E. Platt	
1080 Skye Lane	
Palm Harbor, FL 34683	
	
10. Attached is an original certificate of existence, no more than 90 dathe jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	
11. Nature of business or purposes to be conducted or p	•
Any Lawful	
011111	
ZYVWA	
	orized representative of a member.
(In accordance with section 608.408(3), F.S., the execut	on of this document constitutes an affirmation under the

Typed or printed name of signee

Lawrence E. Platt

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.)

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 name of the Limited Liability Company is: Topside Financial, LLC		
If unavailable, the alternate to be used in the state of Florida is: N/A		
2. The name and the Florida street address of the registered agent and office are: Lawrence E. Platt	13 SEP SECRETA TALLAHA	T I
(Name)	23 SSE	
1080 Skye Lane		
Florida Street Address (P.O. Box NOT ACCEPTABLE)	RioA ATE BoA	
Palm Harbor FL 34683	- α	

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)

State of Alaska

Department of Commerce, Community and Economic Development Corporations, Business and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community and Economic Development of the State of Alaska, and custodian of comparison records for said state, hereby issues a Certificate of Compliance for:

Topside Financial, LLC

This entity was formed on August 30, 2013 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **September 18, 2013**.

Aurak Bell

Susan K. Bell Commissioner