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(Requestor's Name) (Address) (Address)	900252757609
(City/State/Zip/Phone #)	10/17/1301018014 **125.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 13 OCT 17 PM 12: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Office Use Only	Ϋ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́ΥΫ́
AS.	T. Burch OCI 18 2013

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 RECISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. Global Risk Capital Management LLC

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(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.	Delaware	3.	20-0954389		
	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		
4.	December 29, 2003 (Date of Organization)	5.	Perpetual (Duration: Year limited liability company will ce exist or "perpetual")	ease to	
6.	(Date first transacted business in F	10-1-		್ಷ ದ	
	(See sections 608.501 & 608.502 F.	S. to	determine penalty liability)	0 0 1	-71
7.	515 N. Flagler Drive, Suite		-300		
	West Palm Beach, Florida 3	34	01		Ē
	(Street Addres	s of	Principal Office)	- UN	\mathbf{O}
8.	If limited liability company is a manager-manager	d co	mpany, check here	12: 39	
9.	The name and usual business addresses of the ma	nagi	ng members or managers are as follows:		

John L. Osborne 1655 N. Fort Myer Drive #700, Arlington, VA 22209

Jason Paterniti 515 N. Flagler Drive, Ste P-300, West Palm Beach, FL 33401

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 oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

Private equity firm

<u> </u>	rivate equity firm
	ter et la <u>Alia Classica de la companya de constructions</u> en constructions de la construction de la construction de
	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.)

John L. Osborne

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 Limited Liability Company is:

Global Risk Capital 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:

Corporation Service Co	mpany	OCT CREI
	(Name)	ARC ARC
1201 Hays Street		
Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	12: 3 0RID.
Tallahassee	FL 32301	A 39
	City/State/Zip	

 $\mathbf{F}_{\mathcal{O}}$

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.

Corporation Senvice Company huler Svivia Sanchez Schuler Assistant Vice President

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



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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GLOBAL RISK CAPITAL 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 EIGHTH DAY OF OCTOBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GLOBAL RISK CAPITAL MANAGEMENT, LLC" WAS FORMED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

> FILED 13 OCT 17 PH 12: 39 SECRETARY OF STATE SECRETARY OF STATE



3742571 8300

131175927 You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State AUTHENTICATION: 0798608

DATE: 10-08-13