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PICK-UP	☐ WAIT	MAIL			
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ON SERVICE COMPANY
ACCOUNT NO. : 12000000195
REFERENCE : 969313 158753A
AUTHORIZATION:
COST LIMIT : \$ 125.00
ORDER DATE : January 21, 2014
ORDER TIME : 11:09 AM
ORDER NO. : 969313-005
CUSTOMER NO: 158753A
FOREIGN FILINGS NAME: VALIDOR CAPITAL LLC
XXXX QUALIFICATION (TYPE: LL)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight EXT# 52956
EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Validor Capital 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. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) January 21, 2014 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2255 Glades Road, Suite 324A Boca Raton, FL 33431 (Street Address of Principal Office) 2255 Glades Road, Suite 324A Boca Raton, FL 33431 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Matthew Kaufman, Member, 2255 Glades Road, Suite 324A, Boca Raton, FL 33431 8. 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.)

Signature of an authorized person

(In accordance with section 605.0203, 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.)

Matthew Kaufman, Member

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

I. The name of	of the Limited Liability	y Company is:	
Validor Capital	LLC		<u> </u>
If unavailable, the alternate to be used in the state of Florida is:			
2. The name a		ddress of the registered agent and office are:	
	Corporation Service (Company	
		(Name)	
	1201 Hays Street		
	Florida S	treet 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 605, Florida Statutes.

Corporation Service Company

Sue G. Knight

Assistant Vice President

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

COVER LETTER

SUBJECT:	Validor Capital LLC		
	Þ	Name of Limited Liability Company	
		ability Company for Authorization to Transact Business in Florida, above referenced foreign limited liability company to transact business.	
Please return	all correspondence concerning this r	matter to the following:	
	Lawrence Haut, Esq.		
		Name of Person	
	Golenbock Eiseman Assor Be	ell and Peskoe LLP	223
		Firm/Company	22011
	437 Madison Avenue, 39th Fl	loor 2	Sh 2 P#
		Address	
	New York, NY 10022	<u></u>	
		City/State and Zip Code	<u> </u>
	Lhaut@golenbock.com		
	E-mail address	: (to be used for future annual report notification)	-
For further in	formation concerning this matter, ple	ease call:	
Lav	vrence Haut, Esq.	at () 907-7367	
	Name of Person	Area Code Daytime Telephone Number	-
Divi Reg P.O	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is	s a check for the following amo 125.00 Filing Fee \$130.00 Fil Certificate	Tallahassee, FL 32301 ount: ling Fee & \$\square\$\$\$\$ \$\square\$	

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "VALIDOR CAPITAL 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 TWENTY-FIRST DAY OF JANUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VALIDOR CAPITAL LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JULY, A.D. 2012.

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

5189227 8300

140069834

AUTHENTICATION: 1072977

DATE: 01-21-14

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