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Foreign Limited Liability Company Bagatelle Miami Management, LLC

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COVER LETTER

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SUBJECT:	Bagatolio Mianil M		
		Name of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·
		reign Limited Liability Company for Authorization to Transid to register the above referenced foreign limited liability of	
Please return	all correspondence o	concerning this matter to the following:	
	David Garretson	1	
		Name of Person	
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		Pim/Company	2014 FPR
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	411 W. 14th St.,		-
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	dgarretson@togr	p.com E-mail address: (to be used for future annual report notification)	on) >>
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ror turner int	orniation concerning	g this matter, please call:	
Davi	d Garretson	at (646 <u>624-2400</u>	•
		f Contact Person Area Code Dayt	me Telephone Number
Divis Regis P.O. I	LING ADDRESS; ion of Corporations tration Section 30x 6327 nassee, FL 32314	STREET ADDRESS:	
		ollowing amount: © \$130.00 Filing Fee & © \$155.00 Filing Fee & Certified Copy	S160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

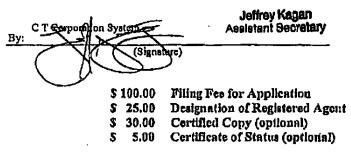
(Name of Poreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of	or "LLC.")	
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate a lability Company," "L.L.C," or "LLC.")	une must include "	Limited
Delaware 3, 37-1718235		
(Jurisdiction under the law of which foreign limited liability (FBI number, if applie company is organized)	able)	
. N/A	Fice	20
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine poneity liability)	1 CO	T NOR
411 W. 14th St., 4th Fl.	2.코	<i>7</i> 0
N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	ري خرا الله جز	ယ်
New York, NY 10014 (Sirect Address of Principal Office)	11 TI	
Same		چ
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(Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to m	nanage is/arc:	29
7. The name, title or capacity and address of the person(s) who has/have authority to magazetle America, LLC - Managing Member		
The name, title or capacity and address of the person(s) who has/have authority to magatelle America, LLC - Managing Member		
7. The name, title or capacity and address of the person(s) who has/have authority to m		
7. The name, title or capacity and address of the person(s) who has/have authority to magatelle America, LLC - Managing Member 11 W. 14th St., 4th Fl. New York, NY 10014 Attached is an original certificate of existence, no more than 90 days old, duly authen aving custody of records in the jurisdiction under the law of which it is organized. (A preceptable. If the certificate is in a foreign language, a translation of the certificate under tust be submitted) Signature of an authorized person	ticated by the cohotocopy is not coath of the tra	official ot anslator
The name, title or capacity and address of the person(s) who has/have authority to magnetic America, LLC - Managing Member II W. 14th St., 4th Fl. New York, NY 10014 Attached is an original certificate of existence, no more than 90 days old, duly authorized custody of records in the jurisdiction under the law of which it is organized. (A preceptable. If the certificate is in a foreign language, a translation of the certificate under	ticated by the cohotocopy is not roath of the tre	official of the anslator

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.

If unavailable, the	alternate to be used in the state of Florida is:	
2. The name and	the Plorida street address of the registered agent ar	nd office are:
C	T Corporation System	ZOI CALL
-	(Namo)	2014 / PR SEGRETA FALLAHAS
. 1	200 South Pine Island Road	ASS
	Florida Street Address (P.O. Box NOT ACCEPT	(") (-)
P	PL 33324 City/State/Zip	9 29 DATE DRIDA

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.





The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO SEREBY CERTIFY "BAGATELLE MIAMI 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 THIRD DAY OF APRIL, A.D. 2014.

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

5185486 8300

140423696

AUTHENTS CATION: 1264245

DATE: 04-03-14