### Florida Department of State

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#### Foreign Limited Liability Company INTERSPAC LLC

| Certificate of Status | 0           |
|-----------------------|-------------|
| Certified Copy        | 1           |
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**COVER LETTER** 

05/14/2014 21:50

| UBJECT:                        |   | Int   | erSpac LLC  |   |
|--------------------------------|---|---|---|---|
|                                | · · · · · · · · · · · · · · · · · · ·                     | Name of Lim   | ited Liability Company                                      |   |
| ne enclosed '<br>distance, and | "Application by For<br>I check are submitted              | eign Limited Liability Com<br>I to register the above refer | puny for Authorization to Trended foreign limited liability | ansact Business in Florida," Certifica<br>y company to transact business in Flo |
| ease return s                  | all correspondence o                                      | oncerning this matter to the                                | following:  |   |
|                                |   | Da  | vld Badner  |   |
|                                |   | Na  | une of Person   |   |
|                                |   | Inte  | erSpec LLC  |   |
|                                |   | Fi  | rin/Company   |   |
|                                | 888 Biscayn   | e Blvd., Suite 5109   |   |   |
|                                |   |   | Address   |   |
|                                | Miami, FL 33  | 3132  |   |   |
|                                |   | City/St   | ate and Zip Code  |   |
|                                | davidbadner   | @aol.com  |   | •   |
|                                |   |   | for future annual report not                                | ification)  |
| or further inf                 | formation concerning                                      | g this matter, please call:                                 |   |   |
| Dav                            | rid Badner  |   | 917 9   | 17-969-1986   |
|                                | Name  | of Person   | Area Code Days  | me Telephone Number   |
| Divis                          | LING ADDRESS:<br>sion of Corporations<br>stration Section | Divisio   | T ADDRESS: n of Corporations ation Section                  |   |
|                                | Box 6327  |   | Building  |   |
| Taila                          | hassee, FL 32314  |   | xecutive Center Circle<br>secc, FL 32301                    |   |
|                                | a abaak fan tha f   | ollowing amount:  |   |   |
| inclosed to                    |   |   |   |   |

## 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:  | DIO ABBIDITA A POMEN  |
|--|---|
| 1 InterSpac LLC  |   |
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.I.  | "C.," or "LLC.")  |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida an consent of the managers or managing members adopting the alternate name. The alternate name must in Company," "L.L.C," "LLC.")  | d attach a copy of the writter<br>achide "Limited Liability |
| 2. Delaware 3  |   |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if appli company is organized)   | cable)  |
| A  | THE TANK  |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)   |   |
| 5. 888 Biscayne Bivd., Suite 5109  | SS 22 1   |
| Mlami, FL 33132  | mg 32   |
| 6. 250 NW 23 St UNIT 204   | 3: 0  |
| MIANI FT. 33127  | 2 P   |
| 7. The name, title or capacity and address of the person(s) who has/have authority to David Badner, Member   | manage is/are:  |
| Chris Crupl, Member  |   |
| Arshan Borhan, Member  |   |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offici in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate it translation of the certificate under oath of the translation must be submitted.) |   |
| Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirm   | ation under the   |
| penalties of perjury that the facts stated herein are true. I am aware that any false information document to the Department of State constitutes a third degree felony as provided for  | n submitted in a  |
| David Badner   | <del></del>   |
| Typed or printed name of signee  |   |

05/14/2014 21:49

## 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.

| 1. The name of the Limited Liability Company       | y is:            |                      |  |
|--|------------------|----------------------|--|
| InterSpa   | ic LLC           |                      |  |
| If unavailable, the alternate to be used in the st | ate of Florida i | 3:                   |  |
| 2. The name and the Florida street address of t    | the registered a | gent and office are: |  |
| National Corpo                                     | rate Research    | Ltd., Inc.           |  |
|  | (Name)           |                      |  |
|  | ffice Plaza Driv |                      |  |
| Florida Street Addres                              | s (P.U. Box NOT  | ACCEPTABLE)          |  |
| Tallahassee  | FL               | 32301                |  |
|  | City/State/Zlp   |                      |  |

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.

Mary Sagin; Asst Socretary.

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

# Delaware

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#### The First State

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

DELAWARE, DO HEREBY CERTIFY "INTERSPAC 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 FIFTEENTH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INTERSPAC LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5524441 8300

140634194

DATE: 05-15-14

Jeffrey W. Bullock, Secretary ( TION: 1373996

You may verify this certificate onlin at corb delaware gov/authver shtml