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(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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COVER LETTER

	ation Section n of Corporations					
SUBJECT: G	IRASOL INVE	STME	NTS LLO	2		
SOBSECT.			d Liability Company			•
	pplication by Foreign Limited I neck are submitted to register the					
Please return all	correspondence concerning this	matter to the	following:			
	Maria Johann	a Bera	ja			
		Na	ame of Person			
	Girasol Invest	ments	LLC			
		Fir	rm/Company			
16192 Coastal Highway, Lewes						
			Address			
	Delaware, 19	958				
		•	ate and Zip Code			
_	ana.machado(_
		•	l for future annual rep	ort notifica	tion)	
	nation concerning this matter, p	lease call:				
Ana	a Machado		_ _{at (} 212	₎ 510	8475	_
	Name of Contact Perso	n	Area Code		time Telephone Number	
	NG ADDRESS: n of Corporations	STREE Division	T ADDRESS:			
Registra	tion Section	Registra	tion Section			
P.O. Bo	x 6327 ssee, FL 32314		Building cecutive Center Circ	cle		
i alialia:	55CC, 1 L 32317		ssee, FL 32301	CiC		
	check for the following an .00 Filing Fee \$130.00 F		□ \$155.00 Filing	a Faa fr	■ \$160.00 Filing Fee, C	'artificate
L \$123	_	of Status	Certified Cop		of Status & Certified	

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:

1. Girasol Investments LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company)	Company," "L.L.C.," or "LLC.")
Iliotropio Investments LLC	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Eliability Company," "L.L.C," or "LLC.")	Florida. The alternate name must include "Limited
_{2.} Delaware	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. N/A	
(Date first transacted business in Florida, if prior to regi (See sections 605.0904 & 605.0905, F.S. to determine pen	stration.) alty liability)
_{5.} 19707 Turnberry way,	
Aventura, FL, 33180	
(Street Address of Principal Office)	
6. 19707 Turnberry way,	
Aventura, FL, 33180	
(Mailing Address)	·- ·- ·
7. The name, title or capacity and address of the person(s) who has/ha Maria Johanna Beraja, Manager, 19707 Turnberry v	iii —
	MA F Trans
8. Attached is an original certificate of existence, no more than 90 days having custody of records in the jurisdiction under the law of which it acceptable. If the certificate is in a foreign language, a translation of the must be submitted) Signature of an authorized pers (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation und am aware that any false information submitted in a document to the Department of State constitutes a thin	is organized. (A photocopy is not e certificate under oath of the translator on ler the penalties of perjury that the facts stated herein are true
Maria Johanna Beraja	- , , , , , , , , , , , , , , , , , , ,

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.

	1.	The name	of the Limited	l Liability	Company	is
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Girasol Investments LLC

If unavailable, the alternate to be used in the state of Florida is:

Iliotropio Investments LLC

2. The name and the Florida street address of the registered agent and office are:

Jessica	Mizrahi	Beraja	•
* .		(Name)	

19707 Turnberry Way

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Aventura _{FL} 33180

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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PAGE 1



State of Belaware

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 898 DOVER, DELAWARE 19903 140530930

9045386 GIRASOL INVESTMENTS LLC 405 PARK AVE, STE 1701 NEW YORK

NY 10022

ATTN: DAVOS FINANCIAL ADVISORS X

04-29-2014

DESCRIPTION	AMOUNT
GIRASOL INVESTMENTS LLC 5353702 8310 Certificate in Re Long Certification Fee Expedite 24 Br., 1-3 Re Long	175.00 60.00
FILING TOTAL	235.00
TOTAL PAYMENTS	235.00
SERVICE REQUEST BALANCE	.00



Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT "GIRASOL INVESTMENTS LLC" IS
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN
GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN
CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW
AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE NINETEENTH DAY OF JUNE,
A.D. 2013, AT 1:08 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "GIRASOL INVESTMENTS LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES PAVE

5353702 8310

140530930

AUTHENTY CATION: 1330167

DATE: 04-29-14

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