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		MAIL	
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Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		
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Office Use Only			
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07/09/14--01003--027 **160.00



UUL 1 0 2014 T. BROWN CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET

ACCT. #FCA-23

CONTACT: <u>SAVANNAH DEBOER</u>

DATE: 07/09/2014

REF. #: <u>7333642.9199524</u>

CORP. NAME: BARUNGTONIVENTURES, LLC

() ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT

() ANNUAL REPORT () TRADEMARK/SERVICE MARK

(XX) FOREIGN QUALIFICATION () LIMITED PARTNERSHIP

() LIMITED LIABILITY

() WITHDRAWAL

() FICTITIOUS NAME

() ARTICLES OF DISSOLUTION

54

X)HOREIGN QUALIFICATION-1 () LI

() REINSTATEMENT () MERGER

() CERTIFICATE OF CANCELLATION

() OTHER:

STATE FEES PREPAID WITH CHECK # 70023269 FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$

PLEASE RETURN:

(XXX))CERTIFIED COPY

(XX))GERTIFICATE OF GOOD STANDING

() PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

Examiner's Initials

COVER LETTER :

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.

TO: Registration Section Division of Corporations

Barlington Ventures, LLC SUBJECT:

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida,

Pl

Please return all correspondence concerning this me	atter to the following:				
William Fuller					
	Name of Person				
Barlington Ventures, LLC					
	Fim/Company				
1637 SW 8th St	treet, Suite 200				
	Address				
Miami, Florida 3	33135				
	City/State and Zip Code				
bill@barlingtong	•				
	(to be used for future annual report notification)				
For further information concerning this matter, pleas	se call:				
William Fuller	,305 ,428-2758				
Name of Contact Person	Area Code Duylime Telephone Number				
MAILING ADDRESS; Division of Corporations Registration Section P.O. Box 6327 Tallahassee, PI. 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amound \$125.00 Filing Fee \$	g Fee & 🛛 \$155.00 Filing fee & 🗖 \$160.00 Filing Fee, Certificate				
•					
·					

14 JUL S PH APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTH TRANSACT BUSINESS IN FLORIDA

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

ſ	Barlington Ventures, LLC	•	- ;		3., 4. j
	(Name of Foreign Limited Liability Company; must in	nclude "Lin	ilted Liability Company,"	'L.L.C.," or "LLC.")	
			· · ·		
(1) Li	f name unavailable, enter alternate name adopted for the purpose a ability Company." "L.L.C." or "LLC.")	of transactin	g business in Florida. The	alternate name must inclu	de "Limited
2	Delaware	3.			•
2.	(Jurisdiction under the law of which foreign limited liability company is organized)		(FT:1 numbe	r, if applicable)	
4.					
	(Date first transacted business (See sections 605.0904 & 605.09	in Florida. 105, F.S. to	If prior to registration.) determine penalty liability	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
5.	1637 SW 8th Street, Suite 200				
	Miami, Florida 33135				
	(Street Addr	ress of Princ	cipal Office)	- <u> </u>	
6.	1637 SW 8th Street, Suite 200				

Miami, Florida 33135

(Malling Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

William Fuller and Martin Pinilla, as Managers

1637 SW 8th Street, Suite 200

Miami, Florida 33135

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 \$.817.155, F.S.)

William Fuller

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 Liability Company is:

Barlington Ventures, 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 arc:

William Fuller	•
(Na	inc)
1637 SW 8th Street	, Suite 200
FlorIda Street Address (P.C). Box NOT ACCEPTABLE)

Miami

FI 33135

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.

~ 0	roll	
	(Signature)	-
• •		

- \$ 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

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BARLINGTON VENTURES, 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 SECOND DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BARLINGTON VENTURES, LLC" WAS FORMED ON THE SECOND DAY OF JULY, A.D. 2014.

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



5562684 8300

140914333 You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State AUTHENTICATION: 1507020

DATE: 07-02-14