Mori Separation of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Foreign Limited Liability Company ALBARUK, LLC

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October 6, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: ALBARUK, LLC REF: W14000060613

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filting of your document, please call (850) 245-6051.

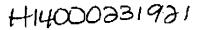
Agnes Lunt Regulatory Specialist II FAX Aud. #: #14000231921 Letter Number: 914A00021285

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DIVISION OF CORPORATIONS
BUNEAU OF CORPORATIONS
INFORMATION SERVICES

P.O BOX 6327 - Tallahassee, Florida 32314



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COVER LETTER

TQ:

Registration Section
Division of Corporations

SUBJECT.

ALBARUK, LLC

Name of Limited Liability Company

The enclosed "Application by Poreign 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.

Please return all correspondence concerning this matter to the following:

OSCAR GRISA	LES-RACINI		
•	Name of Person		
GRSH LAW		50 P	
	Firm/Company	2814 0C	
20801 BISCAYNE BLVD. SUITE 306			ertse
	Address	<u> </u>	4
AVENTURA, FL	_ 33180		
	City/State and Zip Code		•.
SGOMEZ@GR	SHLAW.COM	٠, ٠	
E-mail address:	(to be used for future annual report notification)		

For further information concerning this matter, please call:

SANDRA GOMEZ

Name of Contact Person

Name of Contact Person

Name of Contact Person

Name Telephone Number

MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327

Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

| \$125.00 Filing Fee | \$130.00 Filing Fee & | \$155.00 Filing Fee & | \$160.00 Filing Fee, Certificate of Status & Certified Copy | Of Status & Certified Copy

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

iame univolendo, naturalismo name adopted for the purpose of transacting business in Florida. The abstrate trans- tiller Company," "L.L.C." or "L.L.C.")	must include "Linha
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Miami, FL 33181	7
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11900 Biscayne Blvd. 770	
Miami, FL 33181	
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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.

	of the Limited Liability Cor UK, LLC	npany is:				
If unavailable	e, the alternate to be used in	the state of Florida is:	en f			
2. The name	and the Florida street addre	ss of the registered agent and office are:	(14) (2) (2) (3)			
	OSCAR GRISALES RACINI					
		(Name)				
	20801 BISCA	YNE BLVD SUITE 306				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	AVENTURA	FL 33180				
		Clry/Smre/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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

P3/2# 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "ALBARUK, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAMARS AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF OCTOBER, A.D. 2014.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALBARUK, LLC" WAS FORMED ON THE SIXTEENTH DAY OF AUGUST, A.D. 2013.

5384916 8300

141244449

You may verify this certificate coline at corp.delewere.gov/outhres.shtml

AUTHENTICATION: 1745027

DATE: 10-01-14