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K.SALY EXAMINER OCT 16 2014

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Maverix Global Finance LLC

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.

Please return all correspondence concerning this matter to the following:

rease return an correspondence concerning this i	nation to the	ionowing.		
Alexandre Clu	g			
	N	ame of Person		
Maverix Globa	l Fina	nce LLC		
	Fi	rm/Company		
900 Biscayne l	Blvd,	Apt 3307		
		Address		···········
Miami, FL 331	32			
	City/S	tate and Zip Code		
aclug@copper	.net			
E-mail addre	ss: (to be used	for future annual repo	ort notifica	tion)
For further information concerning this matter, ple	ease call:			
Alexandre Clug		_{at} 305	610	-8000
Name of Contact Person		Area Code		time Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Ex	or ADDRESS: n of Corporations ation Section Building executive Center Circles see, FL 32301	le	
Enclosed is a check for the following amo	ount:			
■ \$125.00 Filing Fee □ \$130.00 Fil Certificate	ing Fee &	□ \$155.00 Filing Certified Copy		□ \$160.00 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:

	TRANSACT BUSINESS IN THE STATE OF FLORIDA;
1. Maverix Global Finance LLC	eany; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Maverix Global Finance I, LLC	any; must include Limited Liability Company, L.L.C., or LEC.)
	ne purpose of transacting business in Florida. The alternate name must include "Limited
₂ Nevada	_{3.} 47-1921908
(Jurisdiction under the law of which foreign limited li company is organized)	
None	
(Date first transac (See sections 605.090	ted business in Florida, if prior to registration.) 04 & 605.0905, F.S. to determine penalty liability)
_{5.} 900 Biscayne Blvd, Ste 3	<i>←</i>
Miami, FL 33132	
_{6.} 900 Biscayne Blvd, Ste 33	(Street Address of Principal Office)
Miami, FL 3307	
	(Mailing Address)
7. The name, title or capacity and address	s of the person(s) who has/have authority to manage is/are:
Alexandre Clug, Manager, 90	0 Biscayne Blvd, Ste 3307, Miami FL 33132
Jerry McRoberts, Manager,	10 East 29th St. # 30E, NY, NY 10016
having custody of records in the jurisdiction	stence, no more than 90 days old, duly authenticated by the official on under the law of which it is organized. (A photocopy is not language, a translation of the certificate under oath of the translator
(In accordance with section 605.0203, F.S., the execution of this	enature of an authorized person is document constitutes an affirmation under the penalties of perjury that the facts stated herein are to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Alexandre Cl	lug

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.
	I IIO IICIIIC	OI UIC	Dillitou	Liuoiiity	Company	13.

Maverix Global Finance LLC

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

Maverix Global Finance I LLC

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

Alexandre Clug	
(Name)	
900 Biscayne Blvd, #3307	•
Florida Street Address (P.O. Box NOT	ACCEPTABLE)
Miami, FL 33132	
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.

(Signature)

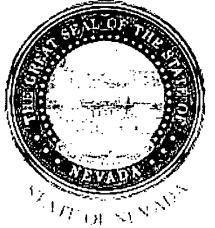
\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, MAVERIX GLOBAL FINANCE LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since September 24, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 24, 2014.

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20140924-1666
You may verify this electronic certificate
online at http://www.nvsos.gov/