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2014 DEC -2 PM 2:24  
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FILED  
14 DEC -2 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 03 2014

S. YOUNG



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 397249 4300123

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : December 2, 2014

ORDER TIME : 10:51 AM

ORDER NO. : 397249-020

CUSTOMER NO: 4300123

FOREIGN FILINGS

NAME: GALAXY IM HOLDINGS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: \_\_\_\_\_

FILED  
14 DEC -2 PM 3:28  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D.C.

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. GALAXY IM HOLDINGS, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability  
company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. c/o Galaxy Fund Management, LLC, 4000 Ponce de Leon Blvd., Suite 470

Coral Gables, FL 33146

(Street Address of Principal Office)

6. c/o Galaxy Fund Management, LLC, 4000 Ponce de Leon Blvd., Suite 470

Coral Gables, FL 33146

(Mailing Address)

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

Galaxy Fund Holdings, LLC, Sole Member

c/o Galaxy Fund Management, LLC, 4000 Ponce de Leon Blvd., Suite 470

Coral Gables, FL 33146

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)

/s/ Gabrielle Flaum

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 s.817.155, F.S.)

Gabrielle Flaum

Typed or printed name of signee

FILED  
DEC - 2 11  
11:28  
STATE OF FLORIDA  
DEPARTMENT OF STATE

**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:

GALAXY IM HOLDINGS, 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 are:

Corporation Service Company

(Name)

1201 Hays Street

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

Tallahassee

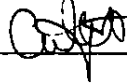
FL 32301

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.*

Corporation Service Company

By:



(Signature)

**Courtney Williams**  
**Asst. Vice President**

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

FILED  
14 DEC -2 PM 2:30  
TALLAHASSEE

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GALAXY IM HOLDINGS, 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 DECEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GALAXY IM HOLDINGS, LLC" WAS FORMED ON THE THIRD DAY OF NOVEMBER, A.D. 2014.

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

FILED  
14 DEC -2 PM 3:29  
SECRETARY OF STATE  
HARRISBURG, PENNSYLVANIA

5632442 8300

141472112



Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1911311

DATE: 12-02-14