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COVER LETTER

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Registration Section
Division of Corporations

SUBJECT: Globaloria, 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:
Richard Brand
Name of Person
Globaloria, LLC Firm/Company
Firm/Company
113 West 78th St. 3rd Floor
Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
R=chard Brand at (201) 577 8221 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: * \$\frac{\chi}{2}\$\$ \$125.00 Filing Fee \(\text{Certificate of Status} \) \$\frac{1}{2}\$\$ \$155.00 Filing Fee \(\text{Certified Copy} \) \$\text{of Status & Certified Copy} \) **Certified Copy**

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, TH FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IF	
1 Calobatoria LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company)	bility Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business)	ess 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) 3. 46	-435748Z
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. (Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to determi	to registration.) ne penalty liability)
5. 113 west 78th Street 3rd Flo	٥ C
New York, NY 10024 (Street Address of Principal Of	
(Street Address of Principal Of	fice)
6	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who h	. lo er
Richard Brand, Acting (Fo	<u> </u>
8. Attached is an original certificate of existence, no more than 90 having custody of records in the jurisdiction under the law of whicacceptable. If the certificate is in a foreign language, a translation must be submitted)	th it is organized. (A photocopy is not
1240	
Signature of an authorized (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation aware that any false information submitted in a document to the Department of State constitute.	on under the penalties of perjury that the facts stated herein are true.
Richard A. Bra	; C ² , C.,
Typed or printed name of sig	nee En E
	E W

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.

	e of the Limited Liability (Comp	pany is:		
If unavailab	le, the alternate to be used	in the	e state of Florida is:		
2. The name	e and the Florida street add	lress (of the registered agent and office are:		
	Registered A	ıge	nt Solutions, Inc.		
	galaya iyo. Bir di Afrika Afrika ya galaya ya kalaya aya aya aya aya aya aya aya aya ay		(Name)	A	
	155 Office Pl	aza	a Dr. Suite A		
	Florida Succ	et Add	fress (P.O. Box NOT acceptable)	_	
	Tallahassee		FL 32301		
			City/State/Zip		
liability comp registered ag statmes relati	oany at the place designated out and agree to act in this ing to the proper and comp	d in ti capa lete p	to accept service of process for the above his certificate. I hereby accept the appoinable. I further agree to comply with the performance of my duties, and I am familitered agent as provided for in Chapter 66	itment as provisions of a lar with and	
	Jacque Llas	Signar	Jaclyn Wright, Asst. Secretary	015 HAY -1	
1		0.00 5.00 0.00	Filing Fee for Application Designation of Registered Agents Certified Copy (optional)	ښ د	
		5.00	Certificate of Status (optional)	09	

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GLOBALORIA, 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 THIRD DAY OF FEBRUARY, A.D. 2015.

5453507 8300

150118683

AUTHENTICATION: 2106044

DATE: 02-09-15

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