(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	ιL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	.
Special Instructions to Filing Officer:	

Office Use Only



900273369749

15 JUN 10 PH 4: 24

2915 JUN 10 A 8:58

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	•	120000000195

REFERENCE: 661940 4814233

AUTHORIZATION :

COST LIMIT : \$/A55.00

ORDER DATE : June 9, 2015

ORDER TIME : 12:36 PM

ORDER NO. : 661940-005

CUSTOMER NO: 4814233

FOREIGN FILINGS

NAME: PHG CAPITAL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

то:

Registration Section

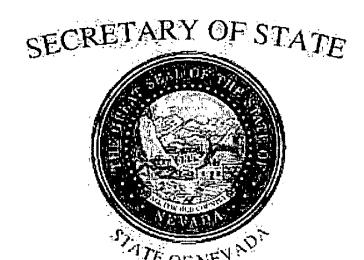
Div	rision of Corporatio	ns					
CHRIECT	PHG Capital, LLC						
SOBILET.		Name of Limited Liability Company					
The enclosed Existence, an	d "Application by Fo ad check are submitte	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limi	ation to Tra ted liabilit	ansact Business in Florida," Certifica y company to transact business in Flo		
Please return	all correspondence	concerning this matter to the	following:				
	Angela E. Bici	math, Paralegal					
	- , ,,	N	ame of Person				
	Morris, Manni	ng & Martin, LLP					
		F	irm/Company				
		3343 Peachtree Road NE, Suite 1600					
			Address				
	Atlanta, Georg	ia 30326					
		City/S	tate and Zip Code				
	kcadin@peachtr	echotelgroup.com					
		E-mail address: (to be use	d for future annual	report not	lification)		
For further in	nformation concernin	g this matter, please call:			·		
Angela E. Biernath, Paralegal		404 at (504-77	25			
	Name o	of Contact Person	Area Code	Day	rtime 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		of Corporations ion Section wilding centive Center Circle			
	check for the follow 125.00 Filing Fee	ring amount: □ \$130.00 Filing Fee & Certificate of Status	■ \$155.00 Filit Certified Copy	ng Fee &	☐ \$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:

, PHG Capital, LLC								
	reign Limited Liabilit	y Company; must in	clude "Limited Lia	bility Compa	any," "L.L.C.,"	or "LLC.")		
If name unavailable, enter a liability Company," "L.L.C		ed for the purpose of	transacting busines	ss in Florida.	. The alternate n	ame must inc	clude "Lim	ited
Nevada			3. 46-2447890					
(Jurisdiction under the law company is organized)	v of which foreign lin		J	(FEI mun	iber, if applicab	le)		
Upon qualification								
	(See sections (ransacted business in 605.0904 & 605.090;	Florida, if prior to 5, F.S. to determin	registration c penalty lial	.) bility)			
. 5607 Glenridge Drive	, Suite 430							
Atlanta, Georgia 3034								
5607 Glenridge Drive,	-	reet Address of Princ	cipal Office)					
Atlanta, Georgia 3034	2	•			***			
		(Mailing Addr	ess)) 	
Name and street addre	ss of Florida registe	ered agent: (P.O. I	Box NOT accept	able)			_	
Name:	Corporation Serv	=				or or l		rastauliti Hassart
Office Address:	1201 Hays Stree)t	***************************************	-		्रिसिन्दर् रास्त्र		
	Tallahassee			_ , Florida _	32301	2 1 600 	ф. ф.	المنسا
		(City)			(Zip code)	100.20	٠. ت	
legistered agent's accep <i>laving been named as re</i>		l to accept service	of process for the	e above sta	ted corporatio	n at the pla	ce design	ated in
is application, I hereby								
ith the provisions of all live obligations of my posi-			mptete performa	nce of my		-		-
3 3 7	Corporation Sp	HCA Copyrany			Cou	rtney W	illiams	
	By: U	(Registered	agent's signature)		Asst.	∀ice Pr	esiden	t
			-					
R. The name, title or capa	-	- "	has/have author	ity to mana	ge is/are:			
Managers: Gregory M. Fi	riedman, Mitul K. Pa	atel and Jatin Desai						
607 Glenridge Drive, Su	iite 430		<u>.</u>					
Atlanta, Georgia 30342								
Attached is a certificate usdiction under the law f the translator must be st	of which it is organ							
		Signature of an	authorized person	<u> </u>				
in accordance with section of facts stated herein are to egree felony as provided	true. I am aware tha	at any false informa						
- ·	Jatin Desai, Mana	•						

Typed or printed name of signee



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, 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, PHG CAPITAL, 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 December 12, 2012, and is in good standing in this state.

O POPULATION OF THE POPULATION

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 9, 2015.

Ballons K. Cegarste

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate

Certificate Number: C20150609-1037 You may verify this electronic certificate online at http://www.nvsos.gov/