

MIS000004981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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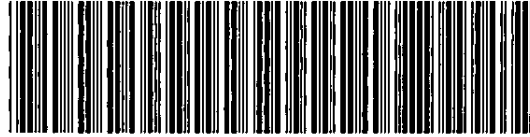
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W. Culligan JUN 24 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: z9 Clubhouse GP I 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:

Jenifer Fessel

Name of Person

DarrowEverett LLP

Firm/Company

One Turks Head Place, Suite 1200

Address

Providence, RI 02903

City/State and Zip Code

cgottlieb@z9capital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chad J. Gottlieb

561
at ()

923-9554

Name of Contact Person

Area Code

Daytime 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 &
Certificate of Status

☐ \$155.00 Filing Fee &
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:

1. z9 Clubhouse GP I 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 3. _____ applied for
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. June 17, 2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 999 Yamato Rd., Ste. 101
Boca Raton, FL 33431
(Street Address of Principal Office)

6. 999 Yamato Rd., Ste. 101
Boca Raton, FL 33431
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Chad J. Gottlieb
Office Address: 999 Yamato Rd., Ste. 101
Boca Raton, Florida 33431
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
(Registered agent's signature)

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

Ben Zion Aboud, Manager
999 Yamato Rd., Ste. 101
Boca Raton, FL 33431

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]
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.)

Ben Zion Aboud
Typed or printed name of signer

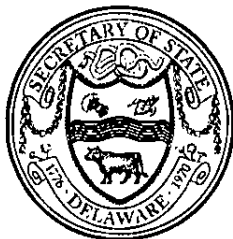
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Delaware

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The First State

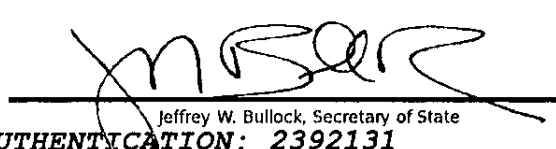
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "Z9 CLUBHOUSE GP I LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF MAY, A.D. 2015.



5750426 8300

150711153

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2392131

DATE: 05-19-15

CONSENT TO USE OF NAME

I, Benzion Aboud, Manager of Z9 Capital, LLC, a limited liability company formed in the State of Delaware ("**Z9**"), hereby consent to the use of the name "Z9 Capital, LLC" (or any variation thereof) with respect to (i) formation of a limited liability company with the Secretary of State of the State of Delaware with the proposed name of "Z9 Capital, LLC", (ii) qualification of the entity referred to in (i) in the State of Florida or in any other jurisdiction with the Secretary of State of any such jurisdiction, and (iii) the formation or qualification in any jurisdiction of any other business entity formed by Manager, Z9 and/or an authorized person of Z9 using "Z9 Capital" in its actual or fictitious business name.

IN WITNESS WHEREOF, the said Z9 Capital, LLC has caused this consent to be executed by Benzion Aboud, Manager under seal.

Z9 Capital, LLC

Benzion Aboud, Manager