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TO: Registration Section

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Div	ision of Corporation	18							
SUBJECT:	Edgepoint Solutions								
SCECT.	Name of Limited Liability Company								
				n to Transact Business in Florida," Certi liability company to transact business in					
Please return	all correspondence of	concerning this matter to the	following:						
	Ellen Joseph								
•	Name of Person								
	Edgepoint Solutions LLC								
		Firm/Company							
	141 Waterford	141 Waterford Drive Suite 12E							
	Address								
	Jupiter, FL 33458								
	***************************************	City/St	tate and Zip Code						
	contact@ellenjos	sephcpa.com							
		E-mail address: (to be used	for future annual re	port notification)					
For further is	nformation concernin	g this matter, please call:							
Ellen Joseph		954 at ()	242-1200						
	Name o	of Contact Person	Area Code	Daytime Telephone Number					
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		D R C 20	ITREET ADDRESS: ivision of Corporations egistration Section lifton Building 661 Executive Center Circle allahassee, FL 32301						
	a check for the follow §125.00 Filing Fee	ring amount: \$\sum \text{\$130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Filing I Certified Copy	Fee & \$160.00 Filing Fee, Certific of Status & Certified Copy	cate				

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Edgepoint Solutions LI (Name of Fore		ity Company; must include "L	imited Liability Company," "L.L.C.,"	or "LLC.")
20	1	16 4	The transfer of the state of th	
(If name unavailable, enter al Liability Company," "L.L.C,		ted for the purpose of transact	ing business in Florida. The alternate n	ame must include "Limited
Delaware			4390743	
(Jurisdiction under the law company is organized)	of which foreign li	mited liability	(FEI number, if applicab	le)
4. <u>N/A</u>				
	(See sections	transacted business in Florida 605.0904 & 605.0905, F.S. t	i, if prior to registration.) o determine penalty liability)	
5. 141 Waterford Drive S	Suite 12E	···		
Jupiter, FL 33458				
141 Waterford Drive S	•	Street Address of Principal Of	fice)	
6. 141 Waterford Drive S	une 1215			
Jupiter, FL 33458				
		(Mailing Address)		
7. Name and street address	<u>ss</u> of Florida regis	stered agent: (P.O. Box N	OT_acceptable)	
Name:	Ellen Joseph			
Office Address:	141 Waterford	Drive Suite 12E		
	Jupiter		, Florida 33458	
		(City)	(Zip code)	_
this application, I hereby	egistered agent an accept the appoi statutes relative	ntment as registered agent to the proper and complete	cess for the above stated corporation and agree to act in this capacity. To performance of my duties, and I do	I further agree to comply am familiar with and accep
	- Will	(Registered agent's	signature)	
8. The name, title or cap:	acity and address	of the person(s) who has/h	ave authority to manage is/are:	JUL 28 AHASSE
Ellen Joseph - Managing	Member			
Kim Moser - Managing N	Лember			115
				© 5 %
		,		
 Attached is a certificate jurisdiction under the law of the translator must be s 	of which it is org	anized. (If the certificate is	y authenticated by the official havir in a foreign language, a translation	ng custody of records in the of the certificate under oath
		Signature of an autho	rized person	
This document is executed submitted in a document to	d in accordance w	vith section 605.0203 (1) (b), Florida Statutes. I am aware that degree felony as provided for in s.8	any false information 17.155, F.S.
	Kir		* *	

Typed or printed name of signee

Delaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "EDGEPOINT SOLUTIONS 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 ELEVENTH DAY OF JULY, A.D. 2015.

15 JUL 28 AM II: OS SECRETARY OF STATE TALLAHASSEE FLORIDA

5772856 8300

150986302

Jeffrey W. Bullock, Secretary of State
AUTHENTACATION: 2547044

DATE: 07-11-15

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