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| PICK-UP | ☐ WAIT | MAIL. |
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| (Bu | siness Entity Name | e) |
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| Certified Copies | Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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SEP OF 2015 J. HARRIS

COVER LETTER

| | ration Section n of Corporatio | ns | | | |
|------------------------------|---|---|--|--|--|
| SUBJECT: | (- | SOLD C | DOAST C | AP T Company | TAL GROUP, L |
| | | | | | nsact Business in Florida," Certificate of company to transact business in Florida |
| Please return all | correspondence | concerning this matter t | o the following: | | |
| | | Roy | ZAGP Name of Person | rec | (A |
| | | | Name of Ferson | | • |
| | | | Firm/Company | | · · · · · · · · · · · · · · · · · · · |
| | 28 | 176 He | RAUN 9 Address | Wa | Ч |
| | Bo | nita S | City/State and Zip Cod | FZ le | 34135 |
| | - Su | OF Propert E-mail address: (to b | y Solution of the used for future annu | <u> </u> | @ mail ~ wn |
| For further infor | rmation concerni | ng this matter, please ca | ıll: | | |
| | YNTH Name | A SCARY of Contact Person | 97) at (239 Area Cod | | 70-7686 time Telephone Number |
| Division Regist P.O. B | ING ADDRESS on of Corporation ration Section lox 6327 assee, FL 32314 | | | Division of Registrati Clifton B 2661 Exe | ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301 |
| Enclosed is a cl | neck for the follows 5.00 Filing Fee | wing amount: ☐ \$130.00 Filing Fe Certificate of Status | | _ | ☐ \$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 FOL COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: | DREIGN LIMITED LIABILITY |
|--|--------------------------|
| 1. GOLD COAST CAPITAL GROUP LIMITED LI | TC.,) |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name Liability Company," "L.L.C," or "L.L.C,") 2. | must include "Limited |
| company is organized) 4. | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) | |
| BONITA SPEWGS FZ 34135 (Street Address of Principal Office) | 2015 SEP |
| 6 | SSEE P |
| (Mailing Address) | |
| 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) | |
| Name: Roy ZAGATEUS | σ |
| Office Address: 28176 Herry & Way | _ |
| Bonuta Springs, Florida 34138 | 5 |
| Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fu with the provisions of all statutes relative to the proper and complete performance of my duties, and I am the obligations of my position as registered agent. | urther agree to comply |
| Por Canaulla | |
| (Registered agent's signature) | |
| 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: | |
| Roy WAGATELLIA, MANAGET | |
| 28176 HURRING WAY | |
| BONITA SPRINGS, FL 3413 | 5 |
| 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having c jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of of the translator must be submitted) | |
| For Congarella Signature of an authorized person | |
| This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817. $ \begin{array}{cccccccccccccccccccccccccccccccccc$ | |

Typed or printed name of signee

SECRETARY OF STATE



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, GOLD COAST CAPITAL GROUP, 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 August 6, 2015, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 27, 2015.

Cagaiste

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150827-2156
You may verify this electronic certificate
online at http://www.nvsos.gov/