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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: BTF GROUP LLC Name of Limited Liability Company				
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:				
BRYAN FERNANDEZ Name of Person				
Name of Person				
BIF GROUP LLC				
Firm/Company				
PO Box 350242				
Address				
MIAMI FL 33135				
City/State and Zip Code				
BIF. GROUP@ YAHOO. com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
BRYAN TORNAUDEZ at (305) 546 - 4898 Name of Contact Person Area Code Daytime Telephone Number				
Name of Contact Person Area Code Daytime Telephone Number				
MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations				
Registration Section Registration Section P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate				
Certificate of Status Certified Copy 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. BIF GROUP		
=	iability Company; must include "Limited Liability Company,"	"L.L.C.," or "LLC.")
	GROUP L.L.C.	14
Liability Company," "L.L.C," or "LLC.")	dopted for the purpose of transacting business in Florida. The a	iternate name must include "Limited
2. STATE OF NEVADA	gn limited liability 3. 46 - 574059 (FEI number, if	17
(Jurisdiction under the law of which foreig company is organized)	gn limited liability (FEI number, if	fapplicable)
	102/2016	
(Date 1	/02/2016 first transacted business in Florida, if prior to registration.) tions 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 226 5W 5th AV	Je, RH/Ste 49A	
Miami FL 3	33130	
6. PO Box 35024	(Street Address of Principal Office) 42	7 20 E
Miami FL 3	3135	22 224.00 024.00 224.00
	(Mailing Address)	
7. Name and street address of Florida re	registered agent: (P.O. Box NOT acceptable)	
Name: Bay	yan Ternaucez	95 21 21
Office Address: 226	SW 5th Ave, Ste 49A	
<u>Mia</u>	mi FL 33.130 , Florida 331	130
Registered agent's acceptance:	(City) (Zi	ip code)
Having been named as registered agent designated in this application, I hereby	nt and to accept service of process for the above stated live accept the appointment as registered agent and agree to tutes relative to the proper and complete performance of its registered agent.	to act in this capacity. I further agree
	The state of the s	
	(Registered agent's signature)	
	ress of the person(s) who has/have authority to manage is/	
BOWAN TORNADOR:	2, Manager. PO Box 350	0242, MAMI HL 33135
7		

9. Attached is a certificate of existence,	no more than 90 days old, duly authenticated by the offic	ial having custody of records in the
jurisdiction under the law of which it is of the translator must be submitted)	organized. (If the certificate is in a foreign language, a tra	inslation of the certificate under oath
,	Report .	
	Signature of an authorized person	
This document is executed in accordance	ce with section 605.0203 (1) (b), Florida Statutes. I am awa	are that any false information
submitted in a document to the Departme	ent of State constitutes a third degree felony as provided for	or in s.817.155, F.S.
	BRYAN TORNADEZ Typed or printed name of signee	
-	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, **BJF 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 April 21, 2014, and is in good standing in this state.

SENL OF THE SENE O

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 5, 2016.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160205-1972
You may verify this electronic certificate
online at http://www.nvsos.gov/