

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160000638643)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067

; (845)425-0077

Phone Fax Number

: (845)818-3588

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Midnight Capital Partners LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

MAR 1 5 2016

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

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 SELTE OF FLORIDA:

1. Midnight Capital Partn (Name of Porc		de "Limited Liability Company," "L.L.C.," or "LL	C.")
(If name unavailable, enter al Liability Company," "L.L.C.	Iternate name adopted for the purpose of true	meacting business in Florida, The alternate name m	ast include "Limited
2. Delaware	, di 22.,		
2. (Jurisdiction under the law company is organized)	of which foreign limited liability	(ITEI number, il applienble)	······································
4.			
	(Date first transacted business in P (See sections 605,0904 & 605,0905, 1	orida, if prior to registration.)	
5. 1430 Broadway Suite	·	To a determine pointly harmy)	, Fo
New York , NY 10018			16 MAR
	(Street Address of Principa	al Office)	五 是而
6. 1430 Broadway Suite I	•	•	元
New York , NY 10018		 	the Education
	(Muiling Address	3)	H T
7 Nama and street address	ss of Florida registered agent: (P.O. Bo.	v NOT pagentable)	8. 23 6. 23
Name;	Vcorp Services, LLC	x <u>NOT</u> deceptable)	5 2
Office Address;	5011 South State Road 7, Suite 106		
	Davie	, Florida 33314	
	(City)	(Zip code)	
this application. I hereby	gistered agent and to accept service of accept the appointment as registered a statutes relative to the proper and com	process for the above stated corporation at t gent and agree to act in this capacity. I furt picte performance of my duties, and I am fai	her agree to comply
	(Rogistered ag	ent's signuture)	
8. The name, title or caps	neity and address of the person(s) who h	as/have authority to manage is/are:	
<u>-</u>	LC, 1430 Brondway Suite 1605, New Y		
(vg)mgme (ve)persee, co	DO, 1400 DIVINGING GARCINGS, 11011 1	and the toolse mender	
			
	of which it is organized. (If the certifica	duly nuthenticated by the official having cust to is in a foreign language, a translation of the	
	Signature of an a	uthorized person	•
) (b), Plorida Statutes. I am aware that any fal aird degree felony as provided for in s.817.155	
	Andrew Martin		

Typed or printed name of signee

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MIDNIGHT CAPITAL PARTNERS 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 MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MIDNIGHT CAPITAL PARTNERS LLC" WAS FORMED ON THE TENTH DAY OF MARCH, A.D. 2016.

TALLAHASSEE, FLOR-32

at corp.delaware.gov/eut

5985873 8300 SR# 20161624572

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

Authentication: 201973653

Date: 03-11-16