M16 00 000 3929

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300284982173

05/17/16--01024--022 **638.75

04/25/16--01026--023 **130.00



MAY 18 2016 J SHIVERS ر دس ردیم دری



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2016

EUGENIO MENDOZA 777 BRICKELL AVE SUITE 1201 MIAMI, FL 33131

SUBJECT: BETA CAPITAL SECURITIES, LLC

Ref. Number: W16000032454

We have received your document for BETA CAPITAL SECURITIES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$638.75.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

www.sunbiz.org

Letter Number: 616A00009116

COVER LETTER

TO:

Registration Section

Div	ision of Corporations						
SUBJECT:	Beta Capital Securities, LLC					_	
	Name of Limited Liability Company						
The enclosed Existence, an	"Application by Foreign Limited check are submitted to registe	ed Liability Compa or the above referer	nny for Authoriza nced foreign limit	tion to Tra ed liability	nsact Business in Florida, company to transact busin	' Certificate of ness in Florida	
Please return	all correspondence concerning	this matter to the fo	ollowing:				
	Eugenio P. Mendoza						
	Name of Person						
	Beta Capital Securities, LI	LC					
	Firm/Company						
	777 Brickell Avenue, Suite 1201						
	Address						
	Miami, Florida 33131						
City/State and Zip Code							
	pmendoza@betacap.com						
	E-mail address: (to be used for future annual report notification)						
For further in	formation concerning this matte	er, please call:					
Eug	enio P. Mendoza		305 at (358-884			
	Name of Contact F	Person	Area Code	Dayı	ime Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
	9	: 0 Filing Fee & te of Status	☐ \$155.00 Filin Certified Copy	g Fee &	□ \$160.00 Filing Fee, C of Status & Certified Co		

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:

(If name unavailable, enter a Liability Company," "L.L.C,		nsacting business in Florida. The alternate na	ame must incl	ude "Li	_ mited
Beta Capital Securitys,		65-0634050			
<u>~,</u>	of which foreign limited liability	(FEI number, if applicable	e)		_
4. 03/12/2015					
4	(Date first transacted business in F	lorida, if prior to registration.)			
5. 777 Brickell Avenue,	(See sections 605.0904 & 605.0905, Suite 1201	r.s. to determine penany hability)			
Miami, Florida 33131					
·	(Street Address of Principa	al Office)			
5. <u>777 Brickell Avenue, S</u>	Suite 1201			5	
Miami, Florida 33131			And the second of the second o		:: !
	(Mailing Address	s)	- 833	17	Schoolster gjørnere
7. Name and street addres	ss of Florida registered agent: (P.O. Bo	x NOT acceptable)	रीक्षेत्रस्य सर्वे स्ट	7 ==	g Sententa
Name:	Eugenio P. Mendoza	<u> </u>		Æ 9:	The second
ramo.	777 Brickell Avenue, Suite 1201		93	CT:	Lead also
Office Address:	777 Bricken Avenue, Suite 1201		137 (~)	വ	
Office Address:	Miami	Florida 33131	Ş	OI	
	Miami (City)	, Florida 33131 (Zip code)	要円 -	OI	
Registered agent's accep Having been named as re designated in this applica to complywith the provisi	Miami (City) tance: rgistered agent and to accept service of tion, I hereby accept the appointment	, riorida	his capacity	ny at t	ther agree
Registered agent's accep Having been named as re designated in this applica to complywith the provisi	Miami (City) tance: rgistered agent and to accept service of tion, I hereby accept the appointment of ons of all statutes relative to the proper my position as registered agent.	(Zip code) process for the above stated limited lia as registered agent and agree to act in t	his capacity	ny at t	ther agree
Registered agent's accep Having been named as re designated in this applica to complywith the provisi accept the obligations of	Miami (City) tance: rgistered agent and to accept service of tion, I hereby accept the appointment of ons of all statutes relative to the proper my position as registered agent.	(Zip code) [Process for the above stated limited lia as registered agent and agree to act in to and complete performance of my dutions's signature)	his capacity	ny at t	ther agree
Registered agent's acception that the second agent's acception to comply with the provision accept the obligations of the second agent and the second acception accept	Miami (City) tance: rgistered agent and to accept service of tion, I hereby accept the appointment of ons of all statutes relative to the proper my position as registered agent. (Registered ag	(Zip code) [process for the above stated limited lia as registered agent and agree to act in the and complete performance of my duting the signature) [process for the above stated limited lia as registered agent and agree to act in the same and complete performance of my duting the signature) [process for the above stated limited lia as registered agent a	his capacity	ny at t	ther agree
Registered agent's acception that a second agent's acception to comply with the provision accept the obligations of the second agent and the second acception acception and the second acception acception acception acception acceptation accep	Miami (City) tance: rgistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the proper my position as registered agent. (Registered agent acity and address of the person(s) who have executive Officer, 777 Brickell Avenue,	(Zip code) [process for the above stated limited lia as registered agent and agree to act in the and complete performance of my duting the signature) [process for the above stated limited lia as registered agent and agree to act in the same and complete performance of my duting the signature) [process for the above stated limited lia as registered agent a	his capacity es, and I am	ny at t	ther agree
Registered agent's accept Having been named as redesignated in this applicate complywith the provision accept the obligations of the Noelia Povedano, Chief Eldelma Hervis, Chief Final D. Attached is a certificate	Miami (City) tance: rgistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the proper my position as registered agent. (Registered agent. (Registered agent. Executive Officer, 777 Brickell Avenue, ancial/Operations Officer, 777 Brickell of existence, no more than 90 days old of which it is organized. (If the certifica	(Zip code)	this capacity es, and I am 31	ny at t. I fur I famili	ther agree iar with an
Registered agent's accept Having been named as redesignated in this applicate complywith the provision accept the obligations of the Noelia Povedano, Chief Eldelma Hervis, Chief Final D. Attached is a certificate purisdiction under the law	Miami (City) tance: rgistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the proper my position as registered agent. (Registered agent. (Registered agent. Executive Officer, 777 Brickell Avenue, ancial/Operations Officer, 777 Brickell of existence, no more than 90 days old of which it is organized. (If the certifica	(Zip code) [Process for the above stated limited lia as registered agent and agree to act in the rand complete performance of my duting the performance of my duting the signature) [Process for the above stated limited lia as registered agent and agree to act in the rand complete performance of my duting the performance of my duting	this capacity es, and I am 31	ny at t. I fur I famili	ther agree iar with an

Typed or printed name of signee

Noelia Povedano

Delaware

PAGE 1

The First State

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

DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND

CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A DELAWARE

LIMITED PARTNERSHIP UNDER THE NAME OF "BETA CAPITAL MANAGEMENT,

L.P." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME

FROM "BETA CAPITAL MANAGEMENT, L.P." TO "BETA CAPITAL

SECURITIES, LLC", FILED IN THIS OFFICE ON THE TWELFTH DAY OF

MARCH, A.D. 2015, AT 5:06 O'CLOCK P.M.

16 MAY 17 AM 9:55

2577291 8100V

150350321

AUTHENTY CATION: 2201183

DATE: 03-16-15

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

State of Delaware Secretary of State Division of Corporations Delivered 07:41 PM 03/12/2015 FILED 05:06 PM 03/12/2015 SRV 150350321 - 2577291 FILE

STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A LIMITED PARTNERSHIP TO A LIMITED LIABILITY COMPANY PURSUANT TO SECTION 18-214 OF THE LIMITED LIABILITY ACT

1.)	Delaware
2.)	The jurisdiction immediately prior to filing this Certificate isDelaware
3.)	The date the Limited Partnership first formed is December 29, 1995.
4.)	The name of the Limited Partnership immediately prior to filing this Certificate is Beta Capital Management, L.P.
5.)	The name of the Limited Liability Company as set forth in the Certificate of Formation is Beta Capital Securities, LLC
IN	WITNESS WHEREOF, the undersigned have executed this Certificate on the 11-14 day of 101-14, A.D. 2015
	By: Authorized Person
	Name: Applia tovada eco Print or Type

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BETA CAPITAL SECURITIES, 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 NINTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BETA CAPITAL SECURITIES, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202286626

Date: 05-09-16