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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA00000023
Phone: (850)205-8842
Fax Number: (850)878-5368

\*\*Enter the email address for this business entity to be used for Thuture, annual report mailings. Enter only one email address please

Email Address:

## Foreign Limited Liability Company AZUR CONSULTING, LLC

Certificate of Status	1
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## COVER LETTER

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TO:		dstration Section Islan of Corporat	ions					
SUBJI	ECT:	AZUR CONSUL	TING LLC					
			Name	of Limited Liabilit	у Совъраву	/		
The end Existen	closed we, an	"Application by I d check are submi	oreign Limited Liability Co tted to register the above ref	mpany for Authori ferenced foreign lin	zation to T uited liabil	ransact Business in Florida," Certificate of ity company to transact business in Florida.		
Please	reium	all correspondence	o concerning this matter to t	he following:				
		BARBARA	P. ALONSO					
		Name of Person						
		SQUIRE PATTON BUGGS						
•	•	Firm/Company						
		200 South Biscayne Boulevard, Suite 4700						
		Address						
		MIAMI, FLORIDA 33131						
		City/State and Zip Code						
		BARBARA.ALONSO@SQUIREPB.COM						
		<del></del>	E-mail address: (to be us	ed for future annue	l report no	tification)		
For furt	her inf	ormatica concerni	ng this matter, please call:					
BARBARA P. ALONSO			305	577-70	•			
		Name	of Contact Person	Area Code	: De	ytime Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exc	r ADDRESS: of Corporations ion Soction suilding scutive Center Circle too, FL 32301			
Enclosed		heck for the follow 25,00 Filing Fee	wing amount: El \$130,00 Fiting Fee & Cortificate of Status	C \$155.00 Filit		# \$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 605,0002, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIMBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. AZUR CONSULTING ILC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "), J.C," or "LLC.") 2. DELAWARE 3. <u>46</u>-S054553 (Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized) (Date first remarked business in Florida, if prior to ragistration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty Hability) 251 Fifth Avenue, 4th Floor New York, New York 10016 (Street Address of Principal Office) 251 Fifth Avenue, 4th Floor New York, New York 10016 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT Corporation System Name: 1200 South Pine Island Rd Office Address: -Plantation 33324 Florida (Zip code) (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position of registered agent. Angel Nunez Assistant Secretary (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc Alex Horovitz Managing Partner 251 Fifth Avenue, 4th Floor New York, New York 10016. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having susted of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) ure of an authorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false the aubmitted in a document to the Department of State constitutes a third degree felony at provided for in \$817.155,

Typed or printed name of signee

Alex Horovitz

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AZUR CONSULTING, 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 TWENTY-FIFTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5483650 8300

Authentication: 202379101

Date: 05-25-16

SR# 20163713496

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