

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : T20080000045

Phone : (302)645-7400 Fax Number : (302)645-1280

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

Email Address: hbuchan@hginvestors.com Foreign Limited Liability Company 3 Notch Capital, LLC Certificate of Status Certified Copy 0 03 Page Count \$130.00 Estimated Charge S Warren

JUN 0 8 2016

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPIDANCE WITH SECTION 605,0002, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

3 Notch Capital, LLC				
(Name of For	eign Limited Linbility Company; must include "Li	nited Liability Company," "L.t. C	," or "LLC"))-E-E-E-E-E
(If name unavailable, enter a Liability Company," "L.L.C.	Hernate name adopted for the purpose of transactin " or "LEC.")	g business in Florida. The alternat	e name must include	"Limited
2. Delaware	7	81-2813264		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applie	enble)	
4. upon filing				
_{5.} 324 Royal Palm	(Date first transacted business in Florida, (See sections 605.0904 & 605.0905, F.S. to t Way, Suite 211	n prior to registration,) determine penulty lightiny)		
Palm Beach, FL 3				
**************************************	(Street Address of Principal Offic	(6)	tale maner .	
6. PO Box 2746 Palm Be	ach, FL 33480		<u> </u>	

	(Malling Address)		三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三	
2 Norma and atment address	ss of Florida registered agent! (P.O. Box NO			
t. Lanute and SifeEf Booke.	Hannah Buchan	(_neceptaine)	ീര	m
Name:		.,	F.S.	
Office Address:	324 Royal Palm Way, Suite 21	1	STATE ORID	
	Pain Beach (City)	, Florida 33480	₩ 7	
	(City)	(Zip code	c)	
designated in this applicate complywith the provisi	rgistered agent and to accept service of proceedion, I hereby accept the appointment as regions of all statutes relative to the proper and only position as registered agent. (Registered agent's s	istered agent and agree to act i complete performance of my d	in this vapacity. I utiles, and I am fai	further agree
	(Registered agent's s	ignature)	Married Married and Parties and Married Marrie	
8. The name, title or cap-	acity and address of the person(s) who has/hav	e authority to manage is/are:		
Hannah Buchan, Member	r - PO Box 2746 Palm Beach, FL 33480			
	rom en stelle en stelle			
 Attached is a certificate jurisdiction under the law of the translator must be s 	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is in ubmitted) Hannah 7. Buch Signature of an authorities	a a foreign language, a translati	on of the certificate	ords in the e under oath
September 1997	·	•		*1m.u
	I in accordance with section 605.0203 (1) (b), a the Department of State constitutes a third do			HOH
	I tunnuh Buchan			

Typed or printed name of signee

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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "3 NOTCH CAPITAL, 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 SEVENTH DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "3 NOTCH CAPITAL,

LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF MAY, A.D. 2016.

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

6051171 8300 SR# 20164328993

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

James of Harmer Secretary of State

Authentication: 202442239

Date: 06-07-16