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16 JUN 17 AM 10: 22

TILE STATE

S Warren JUN 2 0 2016 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 183752 8050708

AUTHORIZATION :

COST LIMIT : \$(160,.00

ORDER DATE: June 17, 2016

ORDER TIME : 10:23 AM

ORDER NO. : 183752-015

CUSTOMER NO: 8050708

FOREIGN FILINGS

NAME: FINANCORP FAMILY OFFICE, LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

____ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJI	FINANCORP FAMILY OFFICE, LLC
SUDJI	Name of Limited Liability Company
The en Exister	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of nee, 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:
	MANUEL S. LOPEZ
	Name of Person
	FINANCORP FAMILY OFFICE, LLC c/o LOPEZ & WARDLE, LLP
	Firm/Company
	411 THEODORE FREMD AVENUE, SUITE 206 SOUTH
	Address
	RYE, NEW YORK 10580
	City/State and Zip Code
	MLOPEZ@LOPEZWARDLE.COM
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	MANUEL S. LOPEZ 914 925-3404 at (
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclose	and is a check for the following amount: \$\Boxed{\Boxesian}\$\$ \$125.00 \text{ Filing Fee} \Boxed{\Boxesian}\$\$\$ \$\$130.00 \text{ Filing Fee} \Boxed{\Boxesian}\$\$\$ \$\$155.00 \text{ Filing Fee} \Boxed{\Boxesian}\$\$\$ \$

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:

, FINANCORP FAMIL	Y OFFICE, LLC			
(Name of For	eign Limited Liability Comp	pany; must include "Limite	d Liability Company," "L.L.	C.," or "LLC.")
(If name unavailable, enter a	lternate name adopted for th	e purpose of transacting b	usiness in Florida. The altern	ate name must include "Limited
Liability Company," "L.L.C,	" or "LLC.")			
2. DELAWARE		3.		
(Jurisdiction under the law company is organized)	of which foreign limited lia	bility	(FEI number, if app	licable)
4. <u>N/A</u>				
	(Date first transact (See sections 605.090	ed business in Florida, if p. 14 & 605.0905, F.S. to dete	rior to registration.) ermine penalty liability)	
5. 2400 E. COMMERCI.	AL BLVD, SUITE 825, I	FORT LAUDERDALE,	FL 33308	
	(Street Ad	dress of Principal Office)		
411 THEODORE ERE	MD AVENUE, SUITE 2	•	10580	
6. 411 THEODORE FRE	A VENUE, SUITE 2	.00 300 HI, KTE, NI		73 4 4 6 673
				THE REAL PROPERTY.
	(Mailing Address)		1 B
7. Name and street addres	ss of Florida registered ag	gent: (P.O. Box <u>NOT</u> a	cceptable)	
Name:	Corporation Service Co	ompany		A D
Office Address:	1201 Hays Street			FL G
	Tallahassee		, Florida 22301	一部一
		(City)	(Zip co	
designated in this applica	egistered agent and to ac- tion, I hereby accept the ons of all statutes relativ	appointment as registe to the proper and con	red ugent and agree to ac uplete performance of my	ed liability company at the place of in this capacity. I further agree of duties, and I am familiar with an Courtney Williams Asst. Vice President
8. The name, title or caps	acity and address of the p	erson(s) who has/have a	uthority to manage is/are:	
THE COMPANY IS MA	NAGED BY A BOARD	OF MANAGERS. ATT	ACHED IS THE LIST O	F MANAGERS
OF THE COMPANY AN	ND THEIR ADDRESSE			
	THE THE TRUE TO THE TOTAL TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE TO			
	of which it is organized.	(If the certificate is in a		naving custody of records in the ation of the certificate under oath
This document is executed submitted in a document to	\ in accordance with secti	۱ on 605.0203 (1) (b), Flo	rida Statutes. I am aware t	hat any false information a s.817.155, F.S.

Typed or printed name of signee

MANUEL S. LOPEZ

LIST OF MEMBERS OF THE BOARD OF MANAGERS

OF

FINANCORP FAMILY OFFICE, LLC

NAME	ADDRESS
EDUARDO JUAN BORBERG MENDOZA	2400 E. Commercial Blvd. Suite 825 Ft. Lauderdale, FL 33308
JUAN LORENZO MENDOZA HERNANDEZ	2400 E. Commercial Blvd Suite 825 Ft. Lauderdale, FL 33308
JUAN LORENZO MENDOZA PACHECO	Centro Gerencial Mohedano, Av Mohedano con Calle Chaguaramos Piso 12, Oficina A, La Castellana Caracas, Miranda 1071 VE
MANUEL SANTIAGO LOPEZ	411 Theodore Fremd Avenue Suite 206 South Rye, NY 10580
ORLANDO FERRER	2400 E. Commercial Blvd. Suite 825 Ft. Lauderdale, FL 33308
SIMON ANTONIO MENDOZA HERNANDEZ	Centro Gerencial Mohedano, Av Mohedano con Calle Chaguaramos Piso 11, Oficina A y B, La Castellana Caracas, Miranda 1071 VE
VICTOR MERCADO	2400 E. Commercial Blvd. Suite 825 Ft. Lauderdale, FL 33308

FINE TO A LIME SIDE

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FINANCORP FAMILY OFFICE, 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 SEVENTEENTH DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FINANCORP FAMILY OFFICE, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JULY, A.D. 2008.

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

NYS 8 STATE OF THE PARTY OF THE

Authentication: 202509792

Date: 06-17-16