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Office Use Only



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16 JUL 26 PH I2: 04
SECKETARY OF STATE

J. HARRIS

COVER LETTER

TO:		ation Section n of Corporation	' S				
SUBJE		MINI CAPITAL	ACQUISITIONS OF DELA	WARE, LLC			
SOBGE	···		Name of L	imited Liability	Company		
			eign Limited Liability Comp d to register the above refere				
Please re	eturn all o	correspondence c	oncerning this matter to the f	following:			
		ROBERT M. C	HISHOLM, ESQ.				
			Na	me of Person		,	
		ROBERT M. C	HISHOLM, PA				
Firm/Company							
7378 SW 48TH STREET, SUITE B							
Address							
		MIAMI, FL 33	155				
City/State and Zip Code							
		ADAMLAMNIN	@AOL.COM				
	-		E-mail address: (to be used	for future annual	report noti	fication)	
For furth	her inform	nation concerning	g this matter, please call:				
	ROBER	RT M. CHISHOL	М	305 at (667-426	51	
		Name o	f Contact Person	Area Code	Dayt	time Telephone Number	
	Divisior Registra P.O. Bo	NG ADDRESS: n of Corporations tion Section x 6327 (see, FL 32314			Division of Registration Clifton Bu 2661 Exec	ADDRESS: of Corporations on Section uilding cutive Center Circle see, FL 32301	
Enclosed		ck for the follow 00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Ce of Status & Certified Cop	



FLORIDA DEPARTMENT OF STATE Division of Corporations



July 8, 2016

ROBERT M CHISHOLM ROBERT M CHISHOLM, PA 7378 SW 48TH STREET, SUITE B MIAMI, FL 33155

SUBJECT: GEMINI CAPITAL ACQUISITIONS OF DELAWARE, LLC

Ref. Number: W16000047761

We have received your document for GEMINI CAPITAL ACQUISITIONS OF DELAWARE, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

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 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 216A00014348

16 JUL 26; PH 12: 04
SECKETARY OF STATE
TALL AHASSEE, FLORING

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:

	BINELS IN THE STATE OF FLORIDA.					
GEMINI CAPITAL AC	CQUISITIONS OF DELAWARE, LI	LC				
(Name of Fore	eign Limited Liability Company; must inc	clude "Limited Liabi	lity Company," "L.L.C.," or '	"LLC.")		
Liability Company," "L.L.C."		-	in Florida. The alternate nam	e must inc	lude "L	Limited
DELAWARE		3. <u>32-0446930</u>				
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)			_
·	(Date first transacted business in (See sections 605.0904 & 605.0905)	Florida, if prior to 1	egistration.)	-		
. 7378 SW 48TH STRE	ET, SUITE B, MIAMI, FL 33155	5, 7 to determine		_		
	(Street Address of Princ	rinal Office)	<u>,</u>	- 		
7378 SW 48TH STREE	ET, SUITE B, MIAMI, FL 33155	ipai Oilico)			ආ	
	21, 3011L B, MIAMI, FL 33133			- SHE	JUL 2	7
	(Mailing Addr	ress)			©1	*****
. Name and street addres	ss of Florida registered agent: (P.O. E	Box <u>NOT</u> acceptal	ble)	<u>ΓΠ C /</u> ΓΠ	ايرا خالب	in a market
Name:	ROBERT M. CHISHOLM, PA			FSTATE	PH 12: 04	
Office Address:	7378 SW 48TH STREET, SUITE E	3		<u></u>	-97	
	MIAMI		, Florida <u>33155</u>	_		
legistered agent's accep	(City)		(Zip code)			
esignated in this applicate complywith the provision	gistered agent and to accept service tion, I hereby accept the appointment ons of all statutes relative to the property position as registered agent.	nt as registered ag	ent and agree to act in this	s capacity	. Ifu	rther agr
	(Registered	agent's signature)		•		
	city and address of the person(s) who	o has/have authorit	y to manage is/are:			
245 SW 93RD AVENUI	E, MIAMI, FL 33176					
		, · , ••				
	of existence, no more than 90 days o of which it is organized. (If the certifiabmitted)					
	Signature of a	n authorized person		•		
	in accordance with section 605.0203 the Department of State constitutes a	(1) (b), Florida St a third degree felor			ormatic	on
	Alter LA.	$\sim N i \wedge \sim$				

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GEMINI CAPITAL ACQUISITIONS OF

DELAWARE, 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 EIGHTEENTH DAY OF

JULY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GEMINI CAPITAL ACQUISITIONS OF DELAWARE, LLC" WAS FORMED ON THE THIRTIETH DAY OF JUNE, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

Authentication: 202672498

Date: 07-18-16