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SURIFCT:	BridgePoint Associates, LLC					
JOBSECT,	······································	Name of I	Limited Liability C	ompany		
	ed "Application by Foreign Limited and check are submitted to register					
Please retur	n all correspondence concerning the	his matter to the	following:			
	Jeffrey Balfour					
	 	Na	ame of Person			
	BridgePoint Associates, LL	.C				
		Fi	rm/Company			
	370 Camino Gardens Blvd.	, Suite 330				
			Address			
	Boca Raton/FL 33432					
		City/S	tate and Zip Code		****	
	jeffb@bridgepointassociates	.net				
	E-mail add	dress: (to be used	for future annual	report no	tification)	
For further	information concerning this matter	r, please call:				
Je	ffrey Balfour		203 at (402.72	77	
	Name of Contact Pe	erson	Area Code	Day	ytime Telephone Number	
Di Re P.0	AlLING ADDRESS: ivision of Corporations egistration Section O. Box 6327 illahassee, FL 32314			Division Registrat Clifton E 2661 Ex	of Corporations tion Section Building ecutive Center Circle see, FL 32301	
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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:

1. BridgePoint Associates	, LLC sign Limited Liability Company; must include "Limit	-11:49:C	1.0.30		
(Name of Fore	igh Littiled Liability Company; must include "Limit	ed Liability Company, L.L.C., or "I	LC.")		
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of transacting b	usiness in Florida. The alternate name	must include	"Limite	ed
, Delaware					
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)			
4.	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to det	prior to registration.) ermine penalty liability)			
5. 370 Camino Gardens I					
Boca Raton, FL 33432			T. 00		
	(Street Address of Principal Office)		<u> </u>	9	
6. 370 Camino Gardens B	lvd, Suite 330		新 題	Ť	- T1
Boca Raton, FL 33432				26	
	(Mailing Address)	•	照을	PM	Ш
7. Name and street address	s of Florida registered agent: (P.O. Box NOT a	acceptable)	E ST	;: ĭĭ	ņ
Name:	Jeffrey Balfour			52	
Office Address:	370 Camino Gardens Blvd, Suite 330		ح ـد		
	Boca Raton	, Florida			
designated in this applica to complywith the provision	tance: gistered agent and to accept service of process tion, I hereby accept the appointment as registo ons of all statutes relative to the proper and con my position as registared agent.	ered agent and agree to act in this	capacity. I j	furthe	r agree
	- May				
	(Registered agent's sign	ature)			
8. The name, title or capa	acity and address of the person(s) who has/have:	authority to manage is/are:			
•	g Member, 370 Camino Gardens Blvd, Suite 330	, .			
		-, 			
	of existence, no more than 90 days old, duly aut of which it is organized. (If the certificate in a ubmitted)				
	- July av				
This document is executed submitted in a document to	Ignature of an authorized in accordance with section 605.0203 (1) (b), Floothe Department of State constitutes a third degr	orida Statutes. I am aware that any tee felony as provided for in s.817.1	false informa 55, F.S.	tion	
	JEFFREY BALFOUT Typed or printed name of s	ignec			
	Types or printed name or s	.B.,			

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRIDGEPOINT ASSOCIATES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXICTENCE SO FAR AS THE RECURDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2016.

Authentication: 202961731

5401531 8300 SR# 20165607322

Date: 09-14-16