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(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
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SECRÉTARY OF STATE ALLAHASSEE, FLORIDA

K. SALY NOV - 8 2016 CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO. : 12000000195							
	REFERENCE : 357891 8060509							
	AUTHORIZATION : Spelle le							
	COST LIMIT : \$ 130.00							
ORDER DATE :	November 4, 2016							
ORDER TIME :	10:24 AM							
ORDER NO. :	357891-005							
CUSTOMER NO:	8060509							
FOREIGN FILINGS								
NAME:	MATTO AZOLA PROMOTE, LLC							

XXXX QUALIFICATION (TYPE: <u>LL</u> )
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Melissa Zender EXT# 62956
EXAMINER:

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

IN COMPLIANCE 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:

, MATTO AZOLA PRO	MOTE, LLC			
(Name of Fore	ign Limited Liability Compa	any; must include "Limited Li	ability Company," "L.L.C.," o	r "LLC.")
Liability Company," "L.L.C,		· ·	ess in Florida. The alternate na	
2. DELAWARE		3, <b></b> _	pplied for (FEI number, if applicable	
(Jurisdiction under the law company is organized)	of which foreign limited liab	bility	(FE) number, if applicable	:)
4	(Date 5 set temperate	d huginess in Florida if nelse	to registration \	_ ·
	(See sections 605.0904	d business in Florida, if prior 4 & 605.0905, F.S. to determi	ne penalty liability)	
s. 1401 Brick	cell Ave, Su	cite 530		
Miami, F	-L 33131	fress of Principal Office)		問言門
	(Street Add	lress of Principal Office)		一一一一一
6. 1401 Br	ickell Ave,	Suite 530		_ 553
		Mailing Address)		English E
	()	Mailing Address)		5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5
7. Name and street address	s of Florida registered age	ent: (P.O. Box NOT acce	otable)	9.45 FLARID
Name:	Corporation Service Co	mpany		327
Office Address:	1201 Hays Street		<del></del>	
	Tallahassee		Florida 32301 (Zip code)	
		City)	(Zip code)	<del>-</del>
Registered agent's accep		ent service of process for s	he above stated limited liab	hility company at the place
designated in this applica	tion, I hereby accept the	appointment as registered	agent and agree to act in t	his capacity. I further agree
			te performance of my dutic	es, and I am familiar with and
accept the obligations of		ompany 11	4	Melissa Zender
	By:	(Registered sent's signature	en	Asst. Vice President
		(Kegistered agent a signature	;)	
8. The name, title or capa	acity and address of the pe	erson(s) who has/have auth	ority to manage is/are:	
The Capor	al Goup LL	C, Manager	Managed	
1401 Brick	ell Ave, Si	uite 530		
Miami, F	-L 33131			
9. Attached is a cortificate	of avictoria no more the	on 00 days old, duly suthan	ticated by the official having	e custody of records in the
	of which it is organized. (			of the certificate under oath
		ignature of an authorized pers	on	<del>_</del>
			a Statutes. I am aware that a clony as provided for in s.81	
	-	<del></del>	- ·	
	Ty	Caporal yped or printed name of signo	2	<del>_</del>

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MATTO AZOLA PROMOTE, 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 FOURTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MATTO AZOLA PROMOTE, LLC" WAS FORMED ON THE SECOND DAY OF NOVEMBER, A.D. 2016.

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

2016 NOV -7 AM 9: 45
SECRETARY OF STATE
AND ASSEE, FLORIDA

Jeffrey W. Bustock, Secretary of St.

6201771 8300 SR# 20166511024 Authentication: 203285789

Date: 11-04-16