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(Requestor	's Name)
(Address)	
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(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
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Certified Copies C	ertificates of Status
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COVER LETTER

I	Registration (Division of C		3				
SUBJEC		Partners, LL	С				
			Name of L	imited Liability C	Company		
			ign Limited Liability Compa to register the above referer				
Please ret	urn all corres	pondence co	oncerning this matter to the fo	ollowing:			
	Eva	Maria Gonz	alez				
			Nai	me of Person	· -		
	Bull	tick Financi	al Services, LLC			,	
		Firm/Company					
	701	Brickell Av	e., Ste. 2550				
				Address			
	Miai	ni/FL 3313	I				
			. City/Sta	ite and Zip Code			
egonzalez@bulltick.com`							
			E-mail address: (to be used	for future annual	report noti	fication)	
For furthe	r information	concerning	this matter, please call:				
I	Eva Maria Go	onzalez		305 at (722-501	8	
		Name of	Contact Person	Area Code	Dayt	ime Telephone Number	
E F	MAILING A Division of Co Registration S P.O. Box 632' Fallahassee, F	orporations ection 7			Division of Registration Clifton But 2661 Exec	ADDRESS: of Corporations on Section ailding cutive Center Circle see, FL 32301	
	is a check for ■ \$125.00 Fi		ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop	

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. Bulltick Partners, LLC				
(Name of Fore	ign Limited Liability Company; must include "I	Limited Liability Company," "L.L.C.," or "L	LC.")	
Liability Company," "L.L.C,"	ternate name adopted for the purpose of transact or "LLC.")		must include "Limited	
2. Delaware	of which foreign limited liability	38-4018524 (FEI number, if applicable)		
company is organized)	or which foreign limited hability	(FEI number, 11 applicable)		
4	(Date first transacted business in Florid	- : (i i - i i		
5. 701 Brickell Ave., Ste.	(See sections 605.0904 & 605.0905, F.S. t	a, if prior to registration.) to determine penalty liability)		
Miami, FL 33131				
701 Delele II A	(Street Address of Principal Of	Tice)		
6. 701 Brickell Ave., Ste.	2550		16	
Miami, FL 33131			orsic	T1
	(Mailing Address)		DEC -	- E
7. Name and street addres	s of Florida registered agent: (P.O. Box N	OT acceptable)	<u> </u>	-415
Name:	National Registered Agents, Inc			
Office Address:	1200 South Pine Island Road		16 DEC -5 AM II: 08	フ
	Plantation	, Florida 33324 (Zip code)	₹ ∞	
	(City)	(Zip code)		
designated in this applicate to complywith the provision to the complywith the provision to the comply with the provision to the comply with the provision to the complex t	gistered agent and to accept service of pro- tion, I hereby accept the appointment as re- ons of all statutes relative to the proper and my position as registered agent.	egistered agent and agree to act in this of decentions of a complete performance of my duties, a	capacity. I further ag	gree
	- Jenty Unak vo	Jenifer Vincent pe President & Assistant Secretary		
	icity and address of the person(s) who has/h	nave authority to manage is/are:		
9. Attached is a certificate jurisdiction under the law of the translator must be si		in a foreign language, a translation of the	stody of records in the	e ath
	Signature of an autho	prized person		
	I in accordance with section 605.0203 (1) (b) the Department of State constitutes a third	degree felony as provided for in s.817.13		
	Adolfo del C	<u> </u>		
	Typed or printed name	e of signee		

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BULLTICK PARTNERS, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

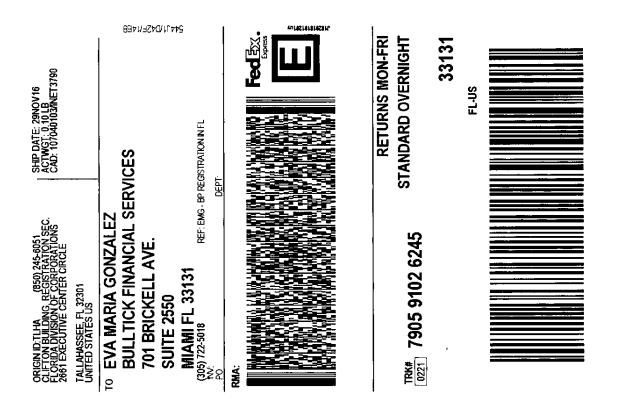
HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE THIRD DAY OF NOVEMBER, A.D. 2016.

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

Authentication: 203279672

Date: 11-03-16



1. Select the 'Print' button to print 1 copy of each label. 2. The Return Shipment instructions, which provide your recipient with information on the returns process, will be printed with the label(s). 3. After printing, select your next step by clicking one of the displayed buttons.

Note: To review or print Individual labela, select the Label button under each label image above.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com.FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, detay, non-delivery,misdelivery,or misinformation, unless you decise a higher value, pay an additional charge, document your actual loss and file a timely claim.Limitations found in the current FedEx Service Guide apply, Your right to recover from FedEx for any loss, incudental, or special is limited to the greater of \$100 or the authorized decised value. Recovery other forms FedEx for any loss, incudental, or special is limited to the greater of \$100 or the authorized decised value. Recovery other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized decised value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable Instruments and other cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable Instruments and other cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable Instruments and other cannot exceed actual documented loss. Maximum for items of extraordinary value is \$600 or the authorized decised value.