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COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT:	SL FAMILY OFFI	CE LLC							
00202011		Name of Limited Liability Company							
The enclosed Existence, an	"Application by Fo d check are submitted	reign Limited Liability Com ed to register the above refer	pany for Authorizatenced foreign limit	tion to Tra ed liability	ansact Business in Florida," y company to transact busin	Certificate of ess in Florida			
Please return	all correspondence	concerning this matter to the	following:						
	Jorge Salcedo								
		N	ame of Person						
	Salcedo Attorr	neys at Law P.A.							
		F	irm/Company						
	200 S Biscayn	e Blvd, Ste 2700							
Address									
	Miami, Florida	ı, 33131							
		City/S	tate and Zip Code						
	jsalcedo@lawjsl								
		E-mail address: (to be use	d for future annual	report not	ification)				
For further in	formation concerning	g this matter, please call:							
Daniel Castro		305 at (375064	0					
<u> </u>	Name o	of Contact Person	Area Code	Day	time Telephone Number				
Divi Regi P.O.	ILING ADDRESS: sion of Corporation: istration Section Box 6327 ahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301				
	check for the follow 125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	g Fee &	□ \$160.00 Filing Fee, Ce of Status & Certified Cop				

APPILICATION 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 RUSINESS IN THE STATE OF FLORIDA.

1. SL FAMILY OFFICE (Name of Fore	LLC eign Limited Liability Company; mus	t include "Lim	ited Liability Company," "L.L.C.,	" or "LLC.")
(If name unavailable enter a	Iternate name adopted for the purpose	of tennanatina	businessis Planida Tilanda	
Liability Company," "L.L.C."	" or "LLC.")	or transacting	business in Fiorida. The alternate	name must include "Limited
2. Delaware		3. 36-478	38887	
(Jurisdiction under the law company is organized)	able)			
4.				
	(Date first transacted busines (See sections 605,0904 & 605,0	ss in Florida, if 0905, F.S. to d	prior to registration.) etermine penalty liability)	
5				
200 S Biscayne Blvd, S	Ste 2720, Miami, FL, 33131			
	(Street Address of P	rincipal Office)	
6. 200 S Biscayne Blvd, S	Ste 2720, Miami, FL, 33131			
	(Mailing A	(ddress)		— <u> </u>
7. Name and street addres	ss of Florida registered agent: (P.0	O. Box. NOT	accentable)	19 AF
Name:	JSH Register Agent Services In			
Office Address:	200 S Biscayne Blvd, Ste 2700			in N
Office Hudiegs.	Miami	<u> </u>	33131	
	(City)		, Florida 33131 (Zip code	
designated in this application to the designated in the provision of the design and the design are designed in the provision of the design and the design are designed in the design are designed in the design are designed in the design are design are designed in the design are design ar	gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the pay position as registered agent.	ment as regisi	tered agent and agree to act in mplete performance of my du	n this capacity. I further agre
8 The name title or cana	icity and address of the person(s)	who has/have	authority to manage is/are:	
	305 SW 103 Ave, Cooper City, FI		authority to manage israte.	
	- Cooper Chy, 11	-, 555-26		
<u> </u>				
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 day of which it is organized. (If the cellbmitted)	's old, duly au	thenticated by the official have a foreign language, a translation	ing custody of records in the on of the certificate under oath
		///		
	Signature of	of an authorized	l person	
This document is executed submitted in a document to	in accordance with section 605.02 the Department of State constitut	203 (1) (b), Files a third deg	orida Statutes. I am aware that ree felony as provided for in s.	any false information 817.155, F.S.
		ric Castillo	• •	•

Typed or printed name of signee

Page 1

Delaware The First State

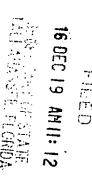
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SL 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 THIRTEENTH DAY OF DECEMBER, A.D. 2016.





Authentication: 203507298

Date: 12-13-16