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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 577678 4807453

AUTHORIZATION

COST LIMIT : \$125.00

ORDER DATE: March 30, 2017

ORDER TIME : 3:15 PM

ORDER NO. : 577678-005

CUSTOMER NO: 4807453

FOREIGN FILINGS

NAME: UNIVERSA BLACK SWAN GP XXVIII

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

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

IN COMPLIANCE WITH SECTION 605.0902, INDRIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Universa Black Swan Offshore GP XXVIII LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) March 20, 2017 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penulty liability) 2601 South Bayshore Drive, Suite 2030, Miami, FL 33133 (Street Address of Principal Office) 2601 South Bayshore Drive, Suite 2030, Miami, FL 33133 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Mark W. Spitznagel Name: 2601 South Bayshore Drive, Suite 2030 Office Address: Miami, (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I furifier agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familian with and accept the obligations of my position as registered agent. (Registered agent's signature) Mark W. Spitznagel 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Mark W. Spitznagel, Manager, 2601 South Bayshore Drive, Suite 2030, Miami, FL 33133 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information

submitted in a document to the Department of State constitutes a third degree follows as provided for in s.817.155, F.S.

Typed or printed name of signee

Mark W. Spitznagel

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<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "UNIVERSA BLACK SWAN OFFSHORE GP XXVIII

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 TWENTY-FIRST DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UNIVERSA BLACK SWAN OFFSHORE GP XXVIII LLC" WAS FORMED ON THE TWENTIETH DAY OF MARCH, A.D. 2017.

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

Authentication: 202232823

Date: 03-21-17

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SR# 20171886121