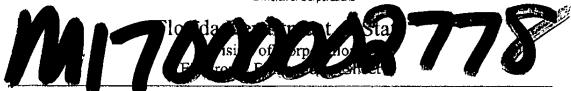
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Division of Corporations



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Account Number : I19990000022

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March 31, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations

J L HOFMANN & ASSOCIATES, P.A.

SUBJECT: BGI CAPITAL, LLC

REF: W17000027549

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II FAX Aud. #: E17000087470 Letter Number: 317A00006192

LITATIA SELECTION DE DE

4170000874703

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 COMPANYTOTRANSACT BI STNESS BY THE STATE OF FLORIDA:

COMPANYTOTRANSACT BUI	SINESS IN THE STATE OF FLORIDA:	edi, '		
(Name of Forc	ign Limited Liability Company; must incl	ude "Limited Liability Cor	npany," "L.L.C.," o	r "LLC.")
(If name unavailable, enter ah Uiability Company," "L.L.C,"	ternate name adopted for the purpose of tra	ansacting business in Flori	da. The alternate no	ame must include "Limited
2 Delaware		36-4857863		
	of which foreign limited liability	(FEI r	umber, if applicabl	c)
4	(Date first transacted business in)	florida, if prior to registrat	ion.)	
5. 175 SW 7th Street # 22	(See sections 605.0904 & 605.0905,	F.S. to determine penalty	liability)	
Miami, FL 33130				
6. 175 SW 7th Street # 220	(Street Address of Princip	oal Office)		_
6. Miarni, FL 33130				
	(Mailing Addre	as)		
7. Name and street address	s of Florida registered agent: (P.O. Bo			
Name:	United States Registered Agents, Inc	Ala.		
Office Address:	420 S. Dixie Highway, Ste 4B Coral Gables		22146	
	(City)	, Flori	da 33146 (Zip code)	<u>-</u>
designated in fils applicate to complywith the provision	tance: gistered agent and to accept service o tion, I hereby accept the appointment ons of all statutes relative to the propi my position as registered agent.	as registered agent and	d agree to act in A	his capacity. I further agree of and tam familiar with an
	X	11/17-		
	(Registered a	gent's signature)		
8. The name, title or capa	city and address of the person(s) who	has/have authority to m	7	
KENNETH BA	BOUN - MANAGER	POBERT BA	RTHELMES C	5-Mayoger U
2 F W2 2FL	treet # 2205	ME F WZ ZA	<u>ud #2705</u>	F. #
MIAM), FL	33130	HIAMI, FL	33130	-
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old of which it is organized. (If the certific abmitted)	1, duly authenticated by ate is in a foreign langu	the official havin age, a translation	g custody of records in the of the certificate under path
			\rightarrow	
	Signature of an	authorized person		
This document is executed submitted in a document to	in accordance with section 605.0203 (the Department of State constitutes a	(1) (b), Florida Statutes. third degree felony as pr	I am aware that a rovided for in s.81	ny false information 17.155, F.S.
	kenneth &	itan		
	Typed or printed	name of signee		_

H170000874703

4170000874703 Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BGI CAPITAL, 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-EIGHTH DAY OF MARCH, A.D. 2017.

6224080 8300

SR# 20172061751

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202282434

Date: 03-28-17