

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000121843 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

 $\mathbf{T}c$:

Division of Corporations

Fax Number : (850) 617-6383

from:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number: 075350000132 : (305)374**-**7580 Phone

Fax Number : (305)351-2122

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company VASTER SUB I, LLC

Certificate of Status	اار	1
Certified Copy		1
Page Count		03
Estimated Charge		\$160.00

MAY 0 4 2017

-YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

H17000121843 3

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

IN COMPLIANCE WITH SECTION 805.0902, FLORIDA STATUTES, THE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE	FOLLOWING IS SUBMITTED TO REGISTER A FOREM
VASTER SUB I, LLC	OF PEORIDA:
(Name of Foreign Limited Liability Company; must include "Limit	ed Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter atternate name adopted for the purpose of trans	secting husiness to Florida and attach a convertible write
consent of the managers or managing members adopting the ulternate nam Company," "L.L.C," "LLC.")	e. The olternate name must include "Limited Liability
2. Delaware	
(Jurisdiction under the law of which toreign limited liability company is organized)	(FEI number, II applicable)
4	4 · 2
(Date first transacted business in Florida, if pr (See sections 605,0904 & 608,0905, F.S. to det	for to registration.) ermine penalty liability)
5. 1300 Brickell Avenue	
Miaml, FL 33131	
(Street Address of Princip	al Office)
6. 1300 Brickell Avenue	<u> </u>
Miami, FL 33131	
(Mailing Address	3)
7. The name, title or capacity and address of the person(s) wh	oghas/have authority to manage is/are;
Vaster Capital, LLC, Member	
1300 Brickell Avenue	
	: :
Miami, FL 33131	<u> </u>
R. Attached is an original certificate of existence, no more than 90 days old, of the jurisdiction under the law of which it is organized. (A photocopy is not marsiation of the certificate under cath of the translator must be submitted.)	
et Deur	9
Signature of an authori	zed person
(In accordance with section 605,0203, F.S., the execution of this penalties of perjury that the facts stated herein are true. I am aw document to the Department of State constitutes a third do Edgardo Defortuna	are that any false information submitted in a
Typed or printed name of	signee
-2 kee at brillian (milio a)	· ;

H17000121843 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

lf unavailal	ole, the alternate to be used i	n the state of Florida is:		
		(À		_
2. The nan	ne and the Florida street addi	ress of the registered agent and office are:		171
	CT Corporation System	em		**
		(Name)	,	င်
	1200 South Pine Isla	and Road	, `	至
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)		AM 10: 35
	Plantation	FL 33324		<u>N</u>
		City/Swic/Zip		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

Madonna Guddiny

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Assistant Secretary

H17000121843 3

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "VASTER SUB I, 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 SECOND DAY OF MAY, A.D. 2017.

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

TALLAHASSCENTES

. 1

6375760 8300

SR# 20173005309

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

Service Servic

Authentication: 202471709

Date: 05-02-17