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2017-06-09 12:04.03 CST

12122023573 From: Kimberly Laughrey

### COVER LETTER

TO:	<b>Registration Section</b>
	The second se

Division of Corporations

# SUBJECT: CG Capital Markets, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Alicia Rotella Name of Person Nixon Peabody LLP Firm/Company 1300 Clinton Square CS Address Rochester, NY 14604 City/State and Zip Code arotella@nixonpeabody.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Name	of Contact Person	at () Area Code	Daytime Telephone Number		
		i ttolt Cloub			
MAILING ADDRESS	MAILING ADDRESS:		STREET ADDRESS:		
Division of Corporation	Division of Corporations		Division of Corporations		
Registration Section	Registration Section		Registration Section		
P.O. Box 6327	P.O. Box 6327		Clifton Building		
Tailahassee, FL 32314		2661 Executive Center Circle			
	•	. Tall:	ahassee, FL 32301		
Enclosed is a check for the follow	ving amount:				
S125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	<ul> <li>         — \$155.00 Filing Fee Certified Copy         </li> </ul>	e & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

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### 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 COMPANYTOTRANSACTBUSINESS INTHE STATEOFFLORIDA;

(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.")

CG Capital Markets, LLC

Delaware		3.		
(Jurisdiction under the law of w	hich foreign limited ltability company is organized)		(FEI number, if a	applicable)
	(Date first transacted business in Frorida, if prior to (See sections 605,0904 & 605 0965, 1'S to determ	ino penalty	en.) y liabiläy)	
327 Plaza Real, Su	ite_225	6.	327 Plaza Real, Suite 225	
(Siree) Address ofI			(Mailing Address)	10
Boca Raton, FL 334	+32		Boca Raton, FL 33432	
				PE F
				PE S
Name and street addres	as of Florida registered agent: (P.O. Box	<u>NOT</u> a	acceptable)	Star -
Name;	C T Corporation System			in on 1
OFFee Address	1200 South Pine Island Road			STR
Office Address:				RIT
	Plantation		, Florida 33324	- <u>D</u> r.
	{City}		(Zip code)	-

#### 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 designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the object the object of the proper and complete performance of my duties, and I am familiar with and accept the object of the provisions of my position as registered agent.)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity:

Name and Address:

Manager	Armand R. Pastine	
	327 Place Real, 80 10 225	 · ····································
		·····
	Base Ration, R. 33432	·····
Manager	Sean Rice	
	327 Pieze Rea , Suite 226	
	Bocs Raton, FL \$3432	·····
	10020 Kalon, FL 33432	

(Use attachments if necessary)

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)

x ·	Armal F. Tostos
	Signature of an authenzed person

10. 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 felony as provided for in s.817.155, F.S.

Armand R. Pastine, Manager

Typed or printed name of signee	

2017-06-09 12:04:03 CST

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12122023573 From: Kimberly Laughrey



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CG CAPITAL MARKETS, 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 NINTH DAY OF JUNE, A.D. 2017.

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

FILED

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SR# 20174678415 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202685435 Date: 06-09-17

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