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(Requestor's Name)				
(A	ddress)			
<u> </u>	ddress)			
(C	City/State/Zip/Phone			
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 802841 4304335

AUTHORIZATION :

COST LIMIT : \$ 125.00/

ORDER DATE: September 8, 2017

ORDER TIME : 1:17 PM

ORDER NO. : 802841-005

CUSTOMER NO: 4304335

FOREIGN FILINGS

NAME: COMVEST SG ADVISORS 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:

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

IN COMPILANCE WITH SECTION 605/0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Comvest SG Advisors	LLC			
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability Company," "L.L.C.," or "LEC"	··)	
(If name unavailable, enter alternate na	ame adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Lumited Li	iability Company," "L.L.C," or "LEC.")	
2. Delaware		3		
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI mur	nber, if applicable)	
4	(Du Garage and Lands of Care and Care a			
	(Date first transacted business in Flonda, if prior to (See sections 605 0904 & 605,0905, F.S. to determine			
5. Comvest SG Advisors (Street Address of F		6. Comvest SG Advisors LL	(dress)	
525 Okeechobee Boulevard, Suite 1050		525 Okeechobee Boulevard, Suite 1050		
West Palm Beach, FL 33401		West Palm Beach, FL 33401		
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)		
Name:	Corporation Service Company		莺.	
Office Address:	1201 Hays Street		SEP	
(1.1.00 / 1.00 f 2.1.0.	Tallahassee	. Florida 32301	(2) (2) (de)	
Registered agent's accep	(City)	(Zap co	ode)	
8. The name, title or cape	Sof my position as registered agent. Corporation Service Company By: (Registered agent's acity and address of the person(s) who has	as/have authority to manage is/are:	Melissa Zender Asst. Vice President	
<u>Title or Capacity:</u> Chief Financial Officer	Name and Address: Cecilio M. Rodriguez	<u>Title or Capacity:</u>	Name and Address:	
Cilier i manetar (virieer	525 Okeechobee Boulevard, Ste 1050	<u> </u>		
	West Palm Beach, FL 33401	-		
(Use attachments if necess	sary)			
	of existence, no more than 90 days old, of which it is organized. (If the certificat abmitted)			
	uted in accordance with section 605.020 the Department of State constitutes a th			
		4. Rodriguez		
	Signature	of an authorized person		
	Cecilio M	. Rodriguez		
	Typed or	printed name of signee		

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "COMVEST SG ADVISORS 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 EIGHTH DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMVEST SG ADVISORS LLC" WAS FORMED ON THE SIXTH DAY OF SEPTEMBER, A.D. 2017.

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



Authentication: 203190694

Date: 09-08-17