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COVER LETTER

TO:	Registration Sec Division of Corp	
SUBJE	Titan Fund I	GP, LLC
SCHOI.		Name of Limited Liability Company
		n by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please	return all correspor	ndence concerning this matter to the following:
	Camilla	i Gurule
		Name of Person
	Titan D	evelopment
		Firm/Company
	6300 Ri	iverside Plaza Lane NW Ste 200
		Address
	Albuqu	erque, NM 87120
		City/State and Zip Code
	cgurule@	citan-development.com
		E-mail address: (to be used for future annual report notification)
For furt	her information co	ncerning this matter, please call:
	Camilla Gurule	505 998-0163
		Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADD Division of Corpx Registration Secti P.O. Box 6327 Tallahassee, FL 3	Division of Corporations ion Registration Section Clifton Building
Enclose	d is a check for the ☐ \$125.00 Filing	following amount: Fee

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

	TION 605.0902, FLORIDA STATUTES, THE F ISINESS IN THE STATE OF FLORIDA:		
Titan Fund I GP, LLC			
(Name of Foreign	Limited Liability Company, must include "Limiti	ed Liability Company," "L.L.C.," or "LLC.")	
name unavailable, enter alternate s	some adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limited Lia	bility Company," "L. L. C," or "LL.C.")
State of Delaware		3 82-2259101	∮
	hich foreign limited liability company is organized)	(FEI num	ner, if applicable)
October 01, 2017			_
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	regiseation.) sine penalty liability)	
6300 Riverside Plaza I	Lane NW Ste 200	6. 6300 Riverside Plaza Lane	
(Street Address of I Albuquerque, NM 87)		(Mailing Add Albuquerque, NM 87120	1
			× 1
			<u> </u>
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	C T Corporation System	 	17 OCT 30
Office Address:	1200 South Pine Island Road		
011100 110010001	Plantation		
	(City)	, Florida 33324	
signated in this applica comply with the provisi	tance: gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the proport s of my position as registered as his	s registered agent and agree to act	in this capacity. I further agr duties, and I am familiar with Brime Smith
esignated in this applica comply with the provisi nd accept the obligation:	gistered agent and to accept service of tion, I hereby accept the appointment of ions of all statutes relative to the property of my position as registered agent's (Registered agent's	s registered agent and agree to act and complete performance of my Vice President	in this capacity. I further agr duties, and I am familiar with
esignated in this applica comply with the provisi nd accept the obligation:	gistered agent and to accept service of tion, I hereby accept the appointment a cons of all statutes relative to the property of my position as registered as int.	s registered agent and agree to act and complete performance of my Vice President	in this capacity. I further agr duties, and I am familiar with Brime Smith
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esignated in this applical comply with the provision accept the obligations. The name, title or capa Title or Capacity:	gistered agent and to accept service of tion, I hereby accept the appointment of tions of all statutes relative to the property of my position as registarial for ht. (Registered agent's accity and address of the person(s) who has a Name and Address: Titan Executive II, LLC 6300 Riverside Plaza Ste 200	Vice Presides and agree to act with the president of the	in this capacity. I further agr duties, and I am familiar with Brithe Smith lent & Assistant Secre
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esignated in this applicate comply with the provision accept the obligations. The name, title or capa Title or Capacity: Manager Attached is a certificate risdiction under the law of the translator must be successed. This document is executed.	gistered agent and to accept service of tion, I hereby accept the appointment of tions of all statutes relative to the property of my position as registered agent's (Registered agent's acity and address of the person(s) who have and Address: Titan Executive II, LLC 6300 Riverside Plaza Ste 200 Albuquerque, NM 87120 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate	duly authenticated by the official ha	in this capacity. I further agriduties, and I am familiar with Briline Smith Ent & Assistant Secre Name and Address: Eving custody of records in the ion of the certificate under oath the that any false information
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Typed or printed name of signee

Page 1

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "TITAN FUND I GP, 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 SEVENTEENTH DAY OF OCTOBER, A.D. 2017.

Authentication: 203410528

Date: 10-17-17

6454322 8300 SR# 20176652731

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