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| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ldress) | |
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| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | MAIT | MAIL |
| (Bu | usiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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| TO: | 1 | Registration Section |
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| | | Division of Corporations |

Panorama Investment Group LLC

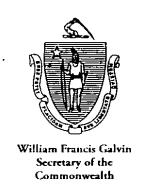
| Na | me of Limited Liability Company |
|--|--|
| | Company for Authorization to Transact Business in Florida," Certificate of e referenced foreign limited liability company to transact business in Florida. |
| Please return all correspondence concerning this matter | to the following: |
| Marco Bettencourt | |
| | Name of Person |
| Panorama Investment Group LLC | |
| | Firm/Company |
| 704 Rogers St | |
| | Address |
| Lowell, MA 01852 | |
| | City/State and Zip Code |
| Marco@panoramainvestment.com | |
| E-mail address: (to | be used for future annual report notification) |
| For further information concerning this matter, please c | all: |
| Marco Bettencourt | 617 335-2462 at () |
| Name of Contact Person | Area Code Daytime Telephone Number |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: \$\Boxed{\omega}\$125.00 Filing Fee \$\Boxed{\omega}\$130.00 Filing Fee Certificate of Status | |

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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| Massachusetts (Jurisdiction under the law of which | ic adopted for the purpose of transacting business in Fk | orida. The alternate name must include "Limites | |
|--|---|---|---|
| | | | d Liability Company," "L.L.C," or "LI,C,") |
| (An indicator) that is the new of wine | Grand hand habita comment | 3. 47-5637790 | number, (f apolicable) |
| | в виседи штиест ашину сонфану то огданилост | Irra | партияст, ст върхисание у |
| | | | |
| | (Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ | o registration.) nine penalty liability) | |
| 704 Rogers St | | 6. 704 Rogers St | |
| (Street Address of Pru | icipal Office) | (Mailing | Address) |
| Lowell, MA 01852 | | Lowell, MA 01852 | <u> </u> |
| | | | |
| | | | 9 () |
| Name and street address | of Florida registered agent: (P.O. Box | x NOT acceptable) | 72 % |
| Manage | Marco Bettencourt | | F. E |
| Name: | | | 0, 1 |
| Office Address: | B315 Byron Avenue Apt #3 | | Ü |
| | Miami Beach | , Florida 33141 | |
| - | (City) | , Florida 55141 | n code) |
| signated in this application comply with the provision | ince: istered agent and to accept service of on, I hereby accept the appointment a ns of all statutes relative to the proper of my position as registered agent | as registered agent and agree to | act in this capacity. I further |
| signated in this application comply with the provision | istered agent and to accept service of on, I hereby accept the appointment a ns of all statutes relative to the proper of my position as registered agent | as registered agent and agree to r and complete performance of t | act in this capacity. I further |
| signated in this application comply with the provision and accept the obligations of | istered agent and to accept service of on, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent | as registered agent and agree to r and complete performance of t | act in this capacity. I further my duties, and I am familiar v |
| rsignated in this application comply with the provision and accept the obligations of the control of the contro | istered agent and to accept service of fon, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent (Registered agent) ity and address of the person(s) who have | as registered agent and agree to r and complete performance of the characteristics and agree to as have authority to manage is/ar | act in this capacity. I further my duties, and I am familiar v |
| rsignated in this application comply with the provision accept the obligations of the control of | istered agent and to accept service of fon, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent (Registered agent) ity and address of the person(s) who have and Address: | as registered agent and agree to rand complete performance of the standard of | act in this capacity. I further my duties, and I am familiar s re: Name and Address: |
| signated in this application comply with the provision of accept the obligations of the name, title or capac | istered agent and to accept service of fon, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent (Registered agent) ity and address of the person(s) who have and Address: Marco Bettencourt | as registered agent and agree to r and complete performance of the characteristics and agree to as have authority to manage is/ar | act in this capacity. I further my duties, and I am familiar of re: Name and Address: Emiliano Amoroso |
| signated in this application comply with the provision of accept the obligations of the name, title or capacity: | istered agent and to accept service of fon, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent (Registered agent) ity and address of the person(s) who have and Address: Marco Bettencourt 704 Rogers St | as registered agent and agree to rand complete performance of the standard of | re: Name and Address: Emiliano Amoroso 704 Rogers St |
| signated in this application comply with the provision of accept the obligations of the name, title or capacity: | istered agent and to accept service of fon, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent (Registered agent) ity and address of the person(s) who have and Address: Marco Bettencourt | as registered agent and agree to rand complete performance of the standard of | act in this capacity. I further my duties, and I am familiar of re: Name and Address: Emiliano Amoroso |
| signated in this application comply with the provision of accept the obligations of the name, title or capacity: | istered agent and to accept service of fon, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent (Registered agent) ity and address of the person(s) who have and Address: Marco Bettencourt 704 Rogers St | as registered agent and agree to rand complete performance of the standard of | re: Name and Address: Emiliano Amoroso 704 Rogers St |
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| signated in this application comply with the provision of accept the obligations of the name, title or capacity: | istered agent and to accept service of fon, I hereby accept the appointment and so of all statutes relative to the proper of my position as registered agent (Registered agent) ity and address of the person(s) who have and Address: Marco Bettencourt 704 Rogers St | as registered agent and agree to rand complete performance of the standard of | re: Name and Address: Emiliano Amoroso 704 Rogers St |

Typed or printed name of signee



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02138

Date: October 31, 2017

To Whom It May Concern:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

PANORAMA INVESTMENT GROUP LLC

in accordance with the provisions of Massachusetts General Laws, Chapter 156C, on November 20, 2015.

I further certify that said Limited Liability Company has not filed a Certificate of Cancellation: that said Limited Liability Company has not been administratively dissolved; and that, so far as appears of record, said Limited Liability Company has legal existence.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Villian Travino Galicin

Certificate Number: 17110013480

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: