

M17000009866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

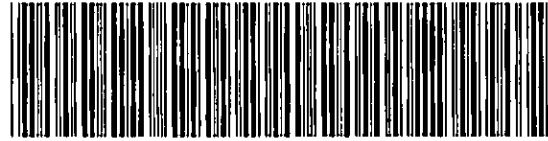
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11/03/17--01002--023 \*\*160.00

11/21/17--01015--023 \*\*1193.75

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17 NOV 20 AM 10 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

BF  
11/21/17

W170000889014



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 6, 2017

ANGELICA BRAVO  
450 ALTON ROAD STE 1104  
MIAMI BEACH, FL 33139 US

SUBJECT: CAUSEWAY CONSULTING AND CAPITAL LLC  
Ref. Number: W17000088904

We have received your document for CAUSEWAY CONSULTING AND CAPITAL LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1193.75.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

BRITTANY M FIGUEROA  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 817A00022446

2017 NOV 20 PM 1:20

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: CAUSEWAY CONSULTING & CAPITAL 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:

ANGELICA BRAVO

\_\_\_\_\_  
Name of Person

CAUSEWAY CONSULTING & CAPITAL LLC

\_\_\_\_\_  
Firm/Company

450 ALTON ROAD, SUITE 1104

\_\_\_\_\_  
Address

MIAMI BEACH, FL 33139

\_\_\_\_\_  
City/State and Zip Code

ABRAVO@CAUSEWAYCC.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANGELICA BRAVO

305

807-3286

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:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☒ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

**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:

1. CAUSEWAY CONSULTING & CAPITAL LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE 3. 27-1792247  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 12/27/2012  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. <u>CAUSEWAY CONSULTING &amp; CAPITAL LLC</u> (Street Address of Principal Office) <u>450 ALTON ROAD, #1103/1104</u> <u>MIAMI BEACH, FL 33139</u>	6. <u>CAUSEWAY CONSULTING &amp; CAPITAL LLC</u> (Mailing Address) <u>450 ALTON ROAD, #1103/1104</u> <u>MIAMI BEACH, FL 33139</u>
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7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: BRYAN LOGAN  
Office Address: 450 ALTON ROAD, SUITE 1103/1104  
MIAMI BEACH, Florida 33139  
(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 obligations of my position as registered agent.*

Bryan Logan  
(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>MGRM</u>	<u>BRYAN LOGAN</u> <u>450 ALTON RD, #1103/1104</u> <u>MIAMI BEACH, FL 33139</u>		
<u>MGR</u>	<u>ANGELICA BRAVO</u> <u>450 ALTON RD, #1103/1104</u> <u>MIAMI BEACH, FL 33139</u>		

(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)

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.

ANGELICA BRAVO  
(Signature of an authorized person)

ANGELICA BRAVO

Typed or printed name of signee

FILED  
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CLERK OF COUNTY OF MIAMI  
DEPARTMENT OF REVENUE

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAUSEWAY CONSULTING AND CAPITAL 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 EIGHTEENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "CAUSEWAY CONSULTING AND CAPITAL LLC" IS A SERIES LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAUSEWAY CONSULTING AND CAPITAL LLC" WAS FORMED ON THE THIRD DAY OF MAY, A.D. 2012.

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



5148895 8300E

SR# 20176674984

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203417976

Date: 10-18-17