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COVER LETTER

eunucer.	Performing Capital Partners, LLC				
SUBJECT: _	Name of Limited Liability Company				
	Application by Foreign Limited Liability Concheck are submitted to register the above refe				
Please return a	Il correspondence concerning this matter to th	e following:			
	Terrence Griffiths				
		Name of Person		_	
	Riveles Wahab, LLP				
		Firm/Company			
	40 Wall Street, 28th Floor				
		Address	3-,		
	New York, NY 10005		LAH	芒	16
	City/	State and Zip Code	<u>ک</u> در در د	21	\$
	terrence@randwlawfirm.com		SSE	. >	<u> </u>
	E-mail address: (to be us	ed for future annua	Treport notification)		<u> </u>
For further info	ormation concerning this matter, please call:			A 10 30 -1 align	
Тепте	nce Griffiths	212 at (785-0076		
	Name of Contact Person	Area Code	Daytime Telephone Number	r	
Divisi Regisi P.O. I	ANG ADDRESS: on of Corporations tration Section Box 6327 massee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	heck for the following amount: 25.00 Filing Fee S130.00 Filing Fee & Certificate of Status	S155.00 Fili Certified Copy			:

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

IN COMPLIANCE WITH SECTION (05:0902, FLORID) STATUTES THE FOLLOWING INSURMITTED TO REGISTER A FOREIGN LIMITED LEIBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Performing Capital Par (Name of Foreign	tners, LLC Limited Liability Company" must include "Limited	d Lightlity Con	դылу,""[,], С , " or " [! С,"]		
(if name may adable, enter alternate n	ame adopted for the purpose of transacting business in Flor	nda 11se alternate	stance mest melade "Funded Lish	vilas Coomein, "T. I. C." er. 11 C. 1	
New York	loch torongo lundeed halwhy conquery is organized (3		er, ti applicable)	
4.	(i) are first transacted business in Harala, it prair to	contration)			
17031 B (01.10)	(Date first transacted bissness in Horida, it prior to it See sections 605 (PM) K (605 (PM)), F.S. to determine			·. (87)	
5. 17031 Boca Club Blvd, Suite 87A		6. <u>170</u>	31 Boca Club Blvd, Sui	tte 87A	
Boca Raton, FL 33487	•		a Raton, FL 33487		
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT accep	nable)		
Name:	Howard Rosencrans		<u> </u>		
Office Address:	17031 Boca Club Blvd, Suite 87A		_) ~- 3.	
	Boca Raton (Car.)		. Florida 33487		l
to comply with the provisi and accept the obligation	ition, I hereby accept the appointment a inny of all statutes relative to the proper is of my positive as registered agent. (Registred agent) acity and address of the person(s) who ha Name and Address:	signature)	ete performance of my o	Name and Address:	
Manager	Howard Rosencrans				
	17031 Boca Club BI, Ste 87A Boca Raton, FL 33487	- -			
		- -			_
(Use attachments if neces	isory)				
	of existence, no more than 90 days old, of which it is organized. (If the certifical ubmitted)				
	o the Department of State constitute a th	ird correc fo	lony as provided for in		
	Sometime	of an authorized	Leuren .		
	Howard Rosencrans, Manager				
	L'yped or	printed name of	чупес		

State of New York Department of State } ss:

I hereby certify, that PERFORMING CAPITAL PARTNERS, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/18/2013, and that the Limited Liability Company is existing so far as shown by the records of the Department.

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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 23rd day of October two thousand and seventeen.

Brendan W. Fitzgerald Executive Deputy Secretary of State

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