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(Re	equestor's Name)	,				
(Address)						
(Ac	ldress)					
(Cit	ty/State/Zip/Phon	ne #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate	s of Status				
Special Instructions to Filing Officer:						
		_				
W18=	212	0 5				

Office Use Only



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MAR 1 5 2619 Y SULKER



March 5, 2018

JACQUES BESSOUDO 2875 NE 191ST ST STE 500 AVENTURE, FL 33180

SUBJECT: GALIUM LAKE MARY, LLC

Ref. Number: W18000021205



We have received your document for GALIUM LAKE MARY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 618A00004419

COVER LETTER

Registration Section

TO:

. . .

Div	ision of Corporation	IS						
SUBJECT:	Galium Lake Mary, LLC							
3000.01		Name of Limited Liability Company						
					unsact Business in Florida," Certificate of y company to transact business in Florida			
Please return	all correspondence c	oncerning this matter to the	following:					
	Jacques Bessou	do						
	Name of Person							
	Galium Capital, LLC							
	Firm/Company							
	2875 NE 191st St. Suite 500							
	Address							
	Aventura. Flori	da 33180						
		City/St	ate and Zip Code					
	wjohnson@galiu	mcapital.com						
		E-mail address: (to be used	for future annual	report not	ification)			
For further is	iformation concerning	g this matter, please call:						
Wi	lhelmina Johnson		786 at (202383	-4			
	Name o	l'Contact Person	Area Code	Day	time Telephone Number			
Div Reg P.O	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding recutive Center Circle see, FL 32301			
	check for the follow 125.00 Filing Fee	ing amount: \$\Bigsize \text{\$\Sigma}\$ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$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 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 Galium Lake Mary, Ll	LC						
		imited Liability Company," "L.L.C.," or "LLC.")				
//F							
	uame adopted for the purpose of transacting business a	m Florida. The alternate name mass include "Limited Lia	ability Company," "L. L. C," or "LI,C,")				
2. State of Delaware Ourisdiction under the law of w	meh foreign lumted liability company is organized)		ber, if applicable)				
		,	act, a apparential				
4. 03/01/2018	(Date first transacted business in Florida of pro-	or to registration	·· ············				
000000000000000000000000000000000000000	(Date first transacted business in Florids, if pridsee sections 605 0904 & 605,0905, F.S. to de	stermine penalty liability)					
5. 2875 NE 191st St. Sui		6. 2875 NE 191st St. Suite 50					
Aventura, Florida 33180		(Mailing Address) Aventura, Florida 33180					
							
			<u></u>				
7. Name and street address	ss of Florida registered agent: (P.O. E	Box NOT acceptable)					
	Galium Capital, LLC	<u> </u>					
Name:	Ganuti Capital, ELC						
Office Address:	2875 NE 191st St, Suite 500						
	Aventura	, Florida <u>33180</u>					
	(City)	, Florida (Zip cod	c) 00				
Registered agent's accep Having been named as re	tance: oistered agent and to accept carries	of process for the above stated limited					
- designated in this applica	tion. I hereby accept the appointm i en	idas registered agent and agree to act	in this capacity. I further agree				
to comply with the provisi	ons of all statutes relative to the prop s of my position as registered agent.	per and complete performance of my	duties, and Lam familiar with				
ини иссері іне оондинон.							
	Jacques Ressoudo						
	(Regnatered age	Λ ⁻					
	city and address of the person(s) who		<u>\$</u>				
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:				
MGR	Galium Capital, LLC						
	2875 NE 191st St, Suite 50 Aventura, FL 33180						
	·						
							
(Use attachments if necess	and a						
	/\						
9. Attached is a certificate	of existence, no more than 90 days of	d, duly authenticated by the official ha	ving custody of records in the				
of the translator must be su	bmitted)	cate is in a foreign language, a translati	on of the certificate under oath				
	\ \						
10. This document is execu	and in accordance with section 605.02	203 (1) (b), Florida Statutes, I am aware third degree felony as provided for in s	that any false information				
satisfice in a document to	the Department of State constitutes a	tilld degree lelony as provided for in s	.817.135, F.S.				
Signature of an authorized person							
Western Co. M. and Orized Delocal							
Jacques Bessoudo							
Typed or printed name of single							

Page 1



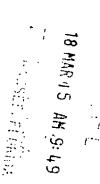
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GALIUM LAKE MARY, 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 MARCH, A.D. 2018.



at corp delaware gov/au

6758180 8300

SR# 20181789006

Date: 03-08-18

Authentication: 202285161