MEDDOUG321

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(,,,,
PICK-UP WAIT MAIL
(Business Entity Name)
(Ezemeee Endi, Name,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400315639644

233 JUL 10 A 5/23 1310

711/1005



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date:	7/10/2018	ACCOUNT#. 120000000008
Name:	Chris Vick	
Reference #:_	D320115	
Entity Name:_	KILLER POINT,	LLC
✓ Articles of	Incorporation/Authorization to T	ransact Business
Amendme	nt	F-22 (-3
☐ Change of	Agent	t
Reinstaten	nent	
☐ Conversion	า	> က
Merger		iN tut
☐ Dissolution	n/Withdrawal	
☐ Fictitous N	ame	
Other		
Authorized Am	nount 11/	

⊕ CORPORATE HQ

Signature:

COGENCY GLOBAL INC. 10 E 40 1 ST, 10 1 FE 11Y, NY 10016 800.221.0102 +1.212.947.7200 DEUROPEAN HQ

COGENCY GLOBAL (UK) HIMITED REGISTERED HENGLAND RIVALES REGISTA JACONS OBENIS MARKS, 19 FL LONDON ECGA 7BA +44 (0)20.3786.1090 ASIA PACIFIC HQ

COGENCY GLOBAL (HK) LIMITED AHONG FONGL MITE COMFANY INFINITUS PLAZA, 12" FL 199 DES VOEUX RD CENTRAL HONG KONG *852.3975.1803



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

5
fig 12 10 14 17
(= (= (= (= (= (= (= (= (= (=
0 > .
<u> </u>

@ CORPORATE HQ

Signature:

COGENCY GLOBALING. 10 E 40 1ST, 10 1FL 11Y, NY 10016 800,221,0107 -1,212,947,7200

Authorized Amount:

@EUROPEAN HQ

COGENCY GLOBAL (UK) HMBED REGISTRED HENGLAND RIVALTS REGISTMERGED? 6 BEVIS MARKS, 1¹³ FL LONDON EC3A 73A +44 (0)20,3786,1090 @ ASIA PACIFIC HQ

COGENCY GLOBAL (HK) LIMITED A HONG KONG LIMITED COMPANY INFINITUS PLAZA, 12" FE 199 DES VOEUX RD CENTRAL HONG KONG *852,3975,1803



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

'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:

			C.")	
f name unavailable, enter alternate ru	ame adopted for the purpose of transacting business in		d Liability Company," "L.L.C," or "LLC.")	
Delaware (Jurisdiction under the law of which foreign limited listility company is organized)			3. 83-1022805	
(Jurisdiction under the law of w)	nch foreign limited liability company is organized)	(FEI	number, if applicable)	
	(Date first transacted business in Florida, if pro (See sections 605 0904 & 605.0905, F.S. to det	or to registration.)		
221 Duval Street	(act realists out by the boyless), the total	6. 201 St. Charles Aven	ue	
5. (Street Address of Principal Office)		O. (Mailing Address)		
Key West, FL 33040		Suite 3915		
···		New Orleans, LA 701	70	
Name and street address Name:	ss of Florida registered agent: (P.O. E	Box NOT acceptable)		
Office Address:	201 S. Biscayne Blvd		****	
	Miami		-4341 -	
	(City)	, Florida <u>33131</u>	p code)	
lesignated in this applica	tion, I hereby accept the appointmen	of process for the above stated lim it as registered agent and agree to per and complete performance of	act in this capacity. I further of	
designated in this applica to comply with the provisi	tion, I hereby accept the appointmentions of all statutes relative to the pross of my position as registered agent.	ut as registered agent and agree to	act in this capacity. I further of	
designated in this applica to comply with the provisi	tion, I hereby accept the appointmentions of all statutes relative to the pro	nt as registered agent and agree to per and complete performance of	act in this capacity. I further of my duties, and I am familiar w	
designated in this applica to comply with the provisi and accept the obligation	tion, I hereby accept the appointmentions of all statutes relative to the pross of my position as registered agent.	nt as registered agent and agree to per and complete performance of this signature)	act in this capacity. I further of my duties, and I am familiar w	
designated in this applicate comply with the provisionand accept the obligation. 8. The name, title or caparity:	tion, I hereby accept the appointmentions of all statutes relative to the properties of my position as registered agent. (Registered agent active and address of the person(s) who Name and Address:	nt as registered agent and agree to per and complete performance of mit's signature) o has/have authority to manage is/a	act in this capacity. I further of my duties, and I am familiar w	
designated in this applicate comply with the provision and accept the obligation. 8. The name, title or capi	tion, I hereby accept the appointmentions of all statutes relative to the properties of my position as registered agent. (Registered agent active and address of the person(s) who Name and Address:	nt as registered agent and agree to per and complete performance of cmt's signature) to has/have authority to manage is/at Title or Capacity: Manager	act in this capacity. I further of my duties, and I am familiar w	
designated in this applicate comply with the provisionand accept the obligation. 8. The name, title or caparity:	tion, I hereby accept the appointment ions of all statutes relative to the properties of my position as registered agent. (Registered agent active and address of the person(s) who Name and Address: John Kirkendoll 201 St. Charles Ave., Ste 391	nt as registered agent and agree to per and complete performance of cmt's signature) to has/have authority to manage is/at Title or Capacity: Manager	re: Name and Address: Caroline Kirkendoll 201 St. Charles Ave., Ste 35	
designated in this applicate comply with the provise and accept the obligation. 8. The name, title or capatite or Capacity: Managing Member	acity and address of the person(s) who Name and Address: John Kirkendoll 201 St. Charles Ave., Ste 391 New Orleans, LA 70170	nt as registered agent and agree to per and complete performance of the performance of th	re: Name and Address: Caroline Kirkendoll 201 St. Charles Ave., Ste 35	
designated in this applicate of comply with the provision accept the obligation. 8. The name, title or capative: Managing Member Manager	Acity and address of the person(s) who Name and Address: John Kirkendoll 201 St. Charles Ave., Ste 391 New Orleans, LA 70170 Timonthy Spratt 201 St. Charles Ave., Ste 391 New Orleans, LA 70170	nt as registered agent and agree to per and complete performance of the performance of th	re: Name and Address: Caroline Kirkendoll 201 St. Charles Ave., Ste 35	
designated in this applicate to comply with the provisional accept the obligation. 8. The name, title or caparate or Capacity: Managing Member Manager (Use attachments if necessity: a certificate in the provision of the translator must be second or the second of the translator must be second. This document is executed to complete the second or th	rition, I hereby accept the appointment ions of all statutes relative to the property of the person (Registered agent. (Pagents and Address: John Kirkendoll 201 St. Charles Ave., Ste 391 New Orleans, LA 70170 (Pagents agents ag	at as registered agent and agree to per and complete performance of per and complete p	re: Name and Address: Caroline Kirkendoll 201 St. Charles Ave., Ste 35 New Orleans, LA 70170 all having custody of records in the instation of the certificate under constant any false information	
designated in this applicate to comply with the provisional accept the obligation. 8. The name, title or caparate or Capacity: Managing Member Manager (Use attachments if necessity: a certificate in the provision of the translator must be second or the second of the translator must be second. This document is executed to complete the second or th	rition, I hereby accept the appointment ions of all statutes relative to the property of the property of the property of the property of the person (Registered agent. (Property of the person(s) who have and Address: John Kirkendoll 201 St. Charles Ave., Ste 391. New Orleans, LA 70170 Timonthy Spratt 201 St. Charles Ave., Ste 391. New Orleans, LA 70170 (Stary)	at as registered agent and agree to per and complete performance of per and complete p	re: Name and Address: Caroline Kirkendoll 201 St. Charles Ave., Ste 35 New Orleans, LA 70170 all having custody of records in the instation of the certificate under constant any false information	

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "KILLER POINT, 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 TENTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KILLER POINT, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JUNE, A.D. 2018.

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



Authentication: 203034063

Date: 07-10-18

6948234 8300 SR# 20185579428