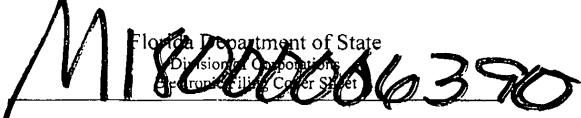
Division of Corporations

Page 1 of 2



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From:

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Account Number : I20010000112 Phone : (302)575-0875 Fax Number : (302)575-1642

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## Foreign Limited Liability Company CRESTONBURY GROUP LLC

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## и18000201780 3

## 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:

CRESTONBURY GRO			
(TABLE OF FOREIGN	Limited Liability Company, must include "Limited L	tability Company," "L.L.C.," or "[L.C.")	
DELAWARE	ome adopted for the purpose of transacting business in Florida	. The alternate runs must include "Limited List	bility Company," "L.L.C," or "LLC.")
	s.h foreign limited liability company is organized)	3. (Fhi numb	ner, if eppaceble)
none			4.0 6
	(Data first transported business in Planta, if prior to regi (349 sections 605,0304 & 605,0905, F.S. to determine)	strution)	
8400 nw 25th S		RADO BUL 25th ST ST	E100
IStront Addition of F BM 10621	rist (gal Office)	(Mailing Addi	·
		8m10621	0
Doral FL 33198		Doral FL 33198	<u> </u>
Name 4	and the state of t	70B	(0)
Minue and street gootes	a of Florida registered agent: (P.O. Box )		11/c 58
Name:	AGENTS AND CORPORATIONS, INC	<del>.</del>	,
Office Address:	300 FIFTH AVENUE SOUTH, STE 101	-330	
	NAPLES	, Florida 34102	
	(City)	, Piorida Cip sod	(4)
	ons of all statutes relative to the proper or s of my position as registered agent.		in this capacity. I further agree duties, and I am familiar with
id accept the obligation:	ions of all statutes relative to the proper are of my position as registered agent.  (Registered agent's sign	nd complete performance of my	
id accept the obligation:	ions of all statutes relative to the proper are of my position as registered agent.	nd complete performance of my	
id accept the obligation; . The name, title or com	(Registered agent and address of the person(s) who has Name and Address:  Vincenzo Siano	nd complete performance of my human) have authority to manage is/are:	Name and Address: Froilan Sandoval
. The name, title or com	(Registered agent Leity and address of the person(s) who has I Name and Address:	nd complete performance of my hands) have authority to manage is/are: Title or Capacity:	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 10
The name, title or com	cons of all statutes relative to the proper are of my position as registered agent.  (Registered agent's right and address of the person(s) who has not a state of the person of the per	nd complete performance of my hands) have authority to manage is/are: Title or Capacity:	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 10
The name, title or com	cons of all statutes relative to the proper are of my position as registered agent.  (Registered agent's right and address of the person(s) who has not a state of the person of the per	nd complete performance of my hands) have authority to manage is/are: Title or Capacity:	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 10
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The name, title or com	cons of all statutes relative to the proper are of my position as registered agent.  (Registered agent step step and address of the person(s) who has a new and Address:  Vincenzo Siano  8400 NW 25th ST STE 100  Dorat PL 33198 bm 10021	nd complete performance of my hands) have authority to manage is/are: Title or Capacity:	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 10
The name, title or com Title or Capacity: Manager  Use attachments if neces	(Registered agent.  (Regis	nd complete performance of my hume) have authority to manage is/are: Title or Capacity: Manager	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 10 Doral FL 33198 hm 106
The name, title or community:  Title or Canagity:  Manager  Use attachments if neces  Attached is a certificate risdiction under the law	ions of all statutes relative to the proper are of my position as registered agent.  (Registered agent a sign statutes of the person(s) who has/lended and Address:  Vincenzo Siano  8400 NW 25th ST STE 100  Dorat PL 33198 bm10821  sary)  of existence, no more than 90 days old, during which it is organized. (If the certificate is	nd complete performance of my have authority to manage is/are:  Title or Capacity:  Manager	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 100 Doral FL 33198 hm 106:
The name, title or committee or Capacity:  Manager  Manager  Attached is a certificate risdiction under the law of the translator must be stored. This document is executed.	ions of all statutes relative to the proper are of my position as registered agent.  (Registered agent a sign statutes of the person(s) who has/lended and Address:  Vincenzo Siano  8400 NW 25th ST STE 100  Dorat PL 33198 bm10821  sary)  of existence, no more than 90 days old, during which it is organized. (If the certificate is	have authority to manage is/are:  Title or Capacity:  Manager  Manager  Ity authenticated by the official has in a foreign language, a translate in the foreign language.	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 106 Doral FL 33198 hm 1063
The name, title or committee or Canapity:  Manager  Manager  Use attachments if neces Attached is a certificate insidiction under the law of the translator must be submitted in a document to	Registered agent.  (Registered agent.  (Regist	have authority to manage is/are:  Title or Capacity:  Manager  Manager  I) (b), Florida Statutes, I am await degree felony as provided for in	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 100 Doral FL 33198 hm 1062  eving custody of records in the ion of the certificate under outh the that any false information 8.817.155, F.S.
The name, title or comments or comments if necessal action under the law the translator must be submitted in a document is executed in a document is executed.	Registered agent.  (Registered agent.  (Regist	have authority to manage is/are:  Title or Capacity:  Manager  Manager  I) (b), Florida Statutes, I am await degree felony as provided for in	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 10 Doral FL 33198 hm 106  wing custody of records in the ion of the certificate under outh the that any false information 8.817,155, F.S.
Use attachments if neces Attached is a certificate or isolated in a document is executed by the translator must be submitted in a document to	cons of all statutes relative to the proper are of my position as registered agent.  (Registered agent a sign statutes of the person(s) who has/lease and Address:  Vincenzo Siano  8400 NW 25th ST STE 100  Dorat Pt. 33198 bm10821  sary)  of existence, no more than 90 days old, durof which it is organized. (If the certificate is abmitted)  uted in accordance with section 605.0203 (	have authority to manage is/are:  Title or Capacity:  Manager  Manager  I) (b), Florida Statutes, I am await degree felony as provided for in Froilan Sandous an authorized person	Name and Address: Froilan Sandoval 8400 NW 25th ST STE 10 Doral FL 33198 hm 106:  wing custody of records in the ion of the certificate under outh the that any false information 8.817.155, F.S.

Types or primed name of signee



Page 1

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

DELAWARE, DO HEREBY CERTIFY "CRESTONBURY GROUP 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 ELEVENTH DAY OF JULY, A.D. 2018.

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

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

Authentication: 203044867

Date: 07-11-18