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(((H180002817653)))



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Fax Number : (850) 617-6383

From:

Account Name : ADVOCATE CONSULTING LEGAL GROUP, PLLC

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**Enter the email address for this business entity to be used f annual report mailings. Enter only one email address pleas.

Email Address: brigetteh@advocatetax.com

Foreign Limited Liability Company Sapphire Holdings, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
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(((H18000281765 3)))

COVER LETTER

	sion of Corporation					
SUBJECT:	Sapphire Holdings, I					
		Name of I	imited Liability C	ompany		
		eign Lunited Liability Comp I to register the above refere				
Please return	all correspondence of	oncerning this matter to the	following:			
	Brigette Hanns					
		Na	eme of Person			
	Advocate Cons	ulting Legal Group, PLLC				
		Fi	rm/Company			
	1300 N. Westsł	nore Blvd, Ste 220				
			Address			
	Tampa, FL 330	507				
	 	City/Si	tate and Zip Code			
	brigetteh@advoc	aletax.com				•
		E-mail address: (to be used	I for future annual	report not	ification)	
For further i	information concernin	g this matter, please call:				
Вг	igette Hanns		239 _.	213-00	66	
	Name o	of Contact Person	Area Code	Day	time Telephone Number	
Di Re P.(AILING ADDRESS: vision of Corporation gistration Section O. Box 6327 Ilahassee, FL 32314			Division Registrat Clifton B 2661 Exe	CADDRESS: of Corporations ion Section milding centive Center Circle ice, FL 32301	
	a check for the follow \$125.00 Filing Fee	ring amount: \$\Bigsim \text{\$\sigma} \text{\$\sigma} \text{\$\sigma} \text{\$\sigma} \$\color{\text{\$\color{\text{\$\color{\co	D'\$155.00 Film Certified Copy	g Fee &	■ \$160.00 Filing Fee, Cc of Status & Certified Cop	

$(((H18000281765\ 3)))$ application by foreign limited liability company for authorization to transact business IN FLORIDA

1. Sapphire Holdings, LLC (Name of Foreign Limited Limbility Company; must include "Limited Liability Company," "LLC," or "LLC
Sapphire Leasing, LLC (Conserve enablished, cotter alternate narros adopted for the puspose of enableting business in Florida. The alternate nature vectode "Limited Liability Company," "LLC," or "IIC.") 2. New Mexico (Date first transacted business in Florida. If prior to regardation.) (Date first transacted business in Florida. If prior to regardation.) (See scaletos 603.0904 & 603.0903, F.S. to determine penalty liability) 5. 4860 NW 83RD Terrace (See scaletos 603.0904 & 603.0903, F.S. to determine penalty liability) Ocala, FL 34482 Ocala, FL 34482 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Thomas Thomason Office Address: 4860 NW 83RD Terrace Ocala (Cry) (Cry) 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
(Canno enavailable, enter alternate name adopted for the purpose of momenting business in Florida. The absentant rathe must include "Limited Limitely Company," "L.L.C." or "IJC.") 2. New Mexico (Just first transacted business in Florida. If prior to registration.) (See scotions 603.0904 & e05.0905, F.S. to determine penalty liability) 5. 4860 NW 83RD Tetrace (Street Address of Friening Office) Ocala, FL 34482 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Thomas Thomason Office Address: 4860 NW 83RD Tetrace Ocala (City) 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
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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 registe <u>ted agent.</u>
Donat Han Hound
(Regulered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Title or Capacity: Name and Address: Title or Capacity: Name and Address:
Title of Capacity
MGR Thomas Thomason
MGR Thomas Thomason 4860 NM 83RD Terrace
MGK Thomas Thomason
MGR Thomas Thomason 4860 NM 83RD Terrace
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(((H18000281765 3)))

OFFICE OF THE SECRETARY OF STATE NEW MEXICO

Certificate of Good Standing and Compliance

IT IS HEREBY CERTIFIED THAT:

SAPPHIRE HOLDINGS, LLC 4780124

the above named entity, a Company organized under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Limited Liability Company, under the

Limited Liability Company Act

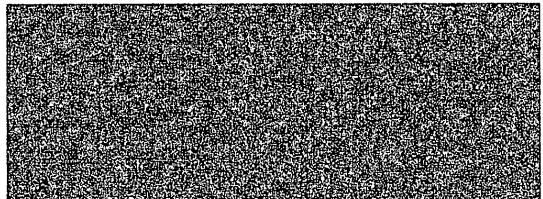
53-19-1 to 53-19-74 NMSA 1978

having filed its Articles of Organization on July 9, 2013, and Certificate of Organization issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: September 18, 2018

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.



Certificate Validation #: 0023721

A certificate issued electronically from the New Nexico Secretary of State's office is immediately veild and effective. The validity of a certificate may be established by viewing the Cartificate Validation option on the Business Filing System at https://portel.sos.state.nm.uv/ors/coline and following the instructions displayed under Certificate Validation.