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| (Requestor's Name) |
|---|
| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| . Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: 120000000088

| Date: October 2, 2018 | Account#: 120 | 000000088 |
|--|---|-------------|
| Name: Marisa Kugelmann | | |
| Reference #: <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u> | | |
| Entity Name: SAYBRUS EQUITY SERVICES, LLC | <u>, </u> | |
| ✓ Articles of Incorporation/Authorization to Transact Busine | SS | |
| Amendment | | |
| Change of Agent | File | second |
| Reinstatement | | |
| Conversion | | |
| ☐ Merger | | |
| ☐ Dissolution/Withdrawal | | |
| Fictitous Name | | |
| Other | . | |
| | | |
| Authorized Amount: \$125.00 Signature: Maubad S | | |

CORPORATE HQ

COGENCY GLOBALING. 10 E 40 ST, 10 1 F L NY, NY 10016 800.221.0102

+1.212.947.7200

EUROPEAN HQ

COGENCY GLOBAL (UK) LIMITED REDISTERED IN ENGLAND & WALES RECOURTER A FOLL MA 6 BEVIS MARKS, 14 FL LONDON ECSA /BA +44 (0)20.3786.1090

ASIA PACIFIC HQ

COGENCY GLOBAL (HK) LIMITED
A HORIG NONG LIMITED COMPANY INFINITUS PLAZA, 12 H 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

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

IN COMPLIANCE 19TH SECTION (05.0702, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| | Limited Liability Company; must include "Limit | Services, LLC | |
|--|---|---|--|
| | | | |
| (If name unavaleble, enter elternate) | name adopted for the purpose of transacting business in Ple | orida. The alternate name must include "! imit | ed Lighting Company to the Company |
| 2. | ₽E | | reacting company. LLCC: a: "LLC." |
| (Junishetta) under the law of o | fuch foreign lim ted liability company is organized) | 3. <u> </u> | ! number, if applicable) |
| 4 | | | |
| | (Date that transacted business in Flerica, if prior to (See sections 605.0904 & 605.0905, F.S. to determ | (cgratation.) | _ |
| 5. One American Row | Hartford, CT 96192-5959 | | - Co |
| (Street Address of) | haraga, Office) | | Harriford, CT:06102-5056 |
| | | (1) atten | E Address) |
| | | · · · · · · · · · · · · · · · · · · · | |
| | | | (|
| 7. Name and street address | is of Florida registered agent: (P.O. Box | VOT acceptables | |
| Name: | C T Corporation System | <u></u> | |
| ivallit. | | | |
| Office Address: | 1200 South Pine Island Road | | ; • |
| | Plentation | | |
| Registered agent's accept | (City) | , Florida 3332 | 2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 |
| | ons of all signifes relative to the proper of my position as registered agency | Leslie Marti Assistant Secre | my duties, and I am familiar with |
| 0. 691 | (Rugistered agent's s | | |
| S. The name, title or capa- Title or Capacity: | city and address of the person(s) who has Name and Address: | s/have authority to manage is/ar <u>Title or Capacity:</u> | e: <u>Name and Address:</u> |
| Manager | Edward W. Cassidy | Manager | |
| | | | The |
| | One American Row | | Thomas Williams |
| | | | Thomas Williams One American Retry Historica, Co. 00(12):3039 |
| Manager | One American Row Harderd, CT 05102-5055 | Manager | One American Rose Harifard, CT 001:32:5059 |
| Manager | One American Row | Manager | Ore American Retainment of Contraction of Contraction Contraction of Contraction |
| Manager | One American Row Harderd, CT 05102-5055 Molifa C. Lowe | Manager | Ore American Retainment of Control of Contro |
| | | | Thomas William |
| (Use attachments if necession. Attached is a certificate of urisdiction under the law of the translator must be sufficient.) This document is executed. | One American Row hardere, CT CS102-SCSS Moira C. Lowe One American Row hardere, CT 05:172-1955 arry) of existence, the impression 90 days old, diff which it is organized. (If the certificate | uly authenticated by the official is in a foreign language, a trans | Ore American Rear merfaed, 01 66132-5059 Thomas M. Buckingham One American Rear Partial, 01 66102-5054 having custody of records in the lation of the certificate under oa |

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SAYBRUS EQUITY SERVICES, 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 FIRST DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAYBRUS EQUITY SERVICES, LLC" WAS FORMED ON THE NINTH DAY OF FEBRUARY, A.D. 2010.

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

Authentication: 203527916

Date: 10-01-18

Page 1



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

DELAWARE, DO HEREBY CERTIFY THAT THE CERTIFICATE OF CONVERSION

OF A DELAWARE CORPORATION UNDER THE NAME OF "SAYBRUS EQUITY

SERVICES, INC." TO A DELAWARE LIMITED LIABILITY COMPANY,

CHANGING ITS NAME FROM "SAYBRUS EQUITY SERVICES, INC." TO

"SAYBRUS EQUITY SERVICES, LLC", WAS FILED IN THIS OFFICE ON THE

FIRST DAY OF OCTOBER, A.D. 2018, AT 4:56 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 203527917

Date: 10-01-18