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DEPARTMENT OF STAT

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	10/04/2018	
Name:		
Reference #	D202452	<u></u>
Entity Name	BEATRICE	V. JEWELRY, LLC
_	les of Incorporation/Authorizatio	n to Transact Business
_	ndment	
☐ Char	nge of Agent	
Rein	statement	
Conv	version	
☐ Merg	ger	
Disso	olution/Withdrawal	
☐ Fictit	ious Name	
☐ Othe	r	
Authorized /	Amount:	125

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

	ON 603.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIAE VESS IN THE STATE OF FLORIDA:	ЗШЛҮ
1. (Name of Foreign Lis	Beatrice V. Jewelry, LLC  inted Liability Company; must include "Limited Liability Company" L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name	adopted for the purpose of transacting business in Florids. The obstrace name must include "Limited Liability Company," "L.L.C," or "LL.C.")  AWASE  3  47 - 5208836	
2. (Jurisdiction under the law of which	AWARE foreign limited Eability company is organized)  3. 47 - 5 20 8836  (FEI number, if applicable)	
4	(Data first transacted business in Florida, if prior to registration.)	
5. 2128 No.11 (Street Address of Prins Miami	(Date first transacted business in Florida. If prior to registration.) (See sections 603,0904 & 603,0905, F.B. to determine penalty bability)  Bay Road  6. 2128 North Bay Road  inal Office)  Black, FL 33140  Miami Black, FL 33.	140
7 Name and street address of	of Florida registered agent: (P.O. Box NOT acceptable)	ې سر سا
Name: _	COGENCY GLOBAL INC.	+ 1
Office Address: _	115 North Calhoun Street, Suite 4	垩
_	Tallahassee , Florida 32301	ڊب
to comply with the provision	n, I hereby accept the appointment as registered agent and agree to act in this capacity. I further a sof all statutes relative to the proper and complete performance of my duties, and I am familiar with fmy position as registered agent.  (Kegistered agent's signature)	
8. The name, title or capaci Title or Capacity: Menber	Name and Address:	
Authorized Person	Revisen Kopel  GYO FICH M. DA  NY, NY 10019 FL	
(Use attachments if necessar	y)	
	existence, no more than 90 days old, duly authenticated by the official having custody of records in the which it is organized. (If the certificate is in a foreign language, a translation of the certificate under onitted)	
10. This document is execute submitted in a document to the	d in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information e Department of State constitutes a third-department of State constitutes a third-department of State constitutes as the department of State constitu	
_	Signature of an authorized person	
_	Reuben Kopel Typed or printed carne of sixnee	

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BEATRICE V. JEWELRY, 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 FOURTH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BEATRICE V.

JEWELRY, LLC" WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2015.

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





Authentication: 203551560

Date: 10-04-18

5839590 8300 SR# 20186989907

You may verify this certificate online at corp.delaware.gov/authver.shtml