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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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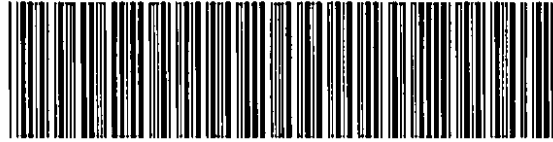
(Business Entity Name)

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SEDA, PAID
DIVISION OF REVENUE

2018 OCT 15 AM 10:22

8/11/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NGFA MIAMI LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ROBERT BURROWS
Name of Person

NGFA MIAMI LLC
Firm/Company

12930 WORLDGATE DR. STE. 300
Address

HERNDON, VA 20170
City/State and Zip Code

RBURROWS@NATGEOFINEART.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT BURROWS at (015) 814-3309
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. NGFA MIAMI LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. VIRGINIA
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 82-3208762
(FEI number, if applicable)

4. 10/8/18
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 655 LINCOLN RD
(Street Address of Principal Office)
MIAMI BEACH, FL
33139
6. 12930 WORLDGATE DR.
(Mailing Address)
STE 300
HERNDON, VA 20170

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: BEKIM VESELI

Office Address: 655 LINCOLN RD.
MIAMI BEACH, Florida 33139
(City) (Zip code)

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 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 registered agent.

(Registered 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:
<u>COO</u>	<u>ROBERT BURNETT</u> <u>12930 WORLDGATE DR.</u> <u>STE. 300</u> <u>HERNDON, VA 20170</u>		
<u>CEO</u>	<u>BEKIM VESELI</u> <u>12930 WORLDGATE DR.</u> <u>STE. 300</u> <u>HERNDON, VA 20170</u>		

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

BEKIM VESELI

Typed or printed name of signer

10 OCT 15 PM 4:34
DIRECTOR OF REVENUE
DIVISION OF REVENUE

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That NGFA Miami LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is October 21, 2017; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

*Signed and Sealed at Richmond on this Date:
October 3, 2018*



Joel H. Peck
Joel H. Peck, Clerk of the Commission