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Certified Copies	Certificates	of Status
Special Instructions to F		

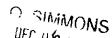
Office Use Only



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ACIONAL SERVICE CONTRACTOR OF THE SERVICE CO



CORPORATION SERVICE COMPANY 1201 Hays Street

XXXX QUALIFICATION (TYPE: LL)

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO. : 12000000195
	REFERENCE : 515502 4301677
	AUTHORIZATION: Spelle Reaco
	COST LIMIT : \$1251.00
ORDER DATE :	December 5, 2018
ORDER TIME :	2:28 PM
ORDER NO. :	515502-005
CUSTOMER NO:	4301677
	FOREIGN FILINGS
NAME:	STRATEGIC DREAMS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

COVER LETTER

SUBJECT:	Strategic Dreams, LLC		
OBJECT:	Name	of Limited Liability Company	
he enclosed xistence, ar	i "Application by Foreign Limited Liability C ad check are submitted to register the above re	ompany for Authorization to Tr eferenced foreign limited liabilit	ansact Business in Florida," Certifice y company to transact business in Flo
ease return	all correspondence concerning this matter to	the following:	
	Scott Duchon		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	Strategic Dreams, LLC		
		Firm/Company	
	711 3rd Avenue, 6th Floor		•
	·	Address	
	NY, NY 10017		
	Cid	ty/State and Zip Code	
	scott@timberlinecapital.com		
	E-mail address: (to be	used for future annual report no	tification)
or further in	nformation concerning this matter, please call:	:	
	Name of Contact Person	Area Code Day	ytime Telephone Number
Divi Reg P.O	ILING ADDRESS: ision of Corporations istration Section Box 6327 ahassee, FL 32314	Division Registrat Clifton E 2661 Exc	of Corporations ion Section suilding coutive Center Circle see, FL 32301
_	check for the following amount: 125.00 Filing Fee School Status	& Cartified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLENCE WITH SECTION 6051802, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Strategic Dreams, LLC

(Nume of Foreign Limited Liability Company, must include "Lumited Liability Company," "LLC." or "LLC.")

(City) Steered agent's acceptance: Tallahassee (City) (City) (City) (City) (City) (City) (Registered agent and agree to act in this capacity: and 1 am accept the provisions of my position as registered agent. (Corporation Service Company) (City) (City) (City) (City) (Registered agent and agree to act in this capacity: and 1 am accept the proper and camplete performance of my duties, and 1 am accept the obligations of my position as registered agent. (Registered agent and address.) (Name and Address.)	This bridge company is expensed. 3. IFEI numbers, if applicable) Annocided beauties in the bright, if prior to regulations.) 6. (Mading Address) Fegistered agent: (P.O. Box NOT acceptable) 7. Service Company Street Florida 32301 (City) Florida 32301 (City) Florida 32301 (City) Florida 32301 (City) Florida diability company at the privace of process for the above stated limited liability company at the privace plate relative to the proper and complete performance of my duties, and I am familiar in the new service Company (Registered agent) (Registered agent) (Registered agent) (Registered spend Epichase) Janet Budhu, Asst. Vice Presidence and Address: Title or Cupacity: Name and Address: 13rd Avenue, 6th Floor 711 3rd Avenue, 6th Floor	ume unavailable, emer akemate	name adopted for the purpose of transacting hormers in Flo	ride. The electrate name must include "Lim	ated Lisbony Company," "L.L.C," or "LLC."
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Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of sdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate translator must be submitted) This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false in	no more than 90 days old, duly authenticated by the official having custody of records in to organized. (If the certificate is in a foreign language, a translation of the certificate under organized with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information	The name, title or caparatite or Capacity: Manager Manager	ions of all statutes relative to the proper against of all statutes relative to the proper s of my position as registered agent. Corporation Service Company By: (Registered agent) Address: Ryan Sasson 711 3rd Avenue, 5th Floor NY, NY 10017 Ian Behar 711 3rd Avenue, 6th Floor NY, NY 10017 sary) of existence, no more than 90 days old, cof which it is organized. (If the certificate abmitted) uted in accordance with section 605.0203	stregistered agent and agree to and complete performance of the strength of th	o act in this capacity. I further f my duties, and I am familiar Janet Budhu, Asst. Vice Pres are: Nume and Address: Jordan Levy 711 3rd Avenue, 6th Fl NY, NY 10017 Daniel Blumkin 711 3rd Avenue, 6th Fl NY, NY 10017
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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "STRATEGIC DREAMS, 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 FIFTH DAY OF DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STRATEGIC DREAMS, LLC" WAS FORMED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2018.

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

Authentication: 204029693

Date: 12-05-18

7110265 8300 SR# 20187978715