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(Requ	iestor's Name)	
(Addr	ess)	-
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(City/:	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Docu	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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AND FILED 2018 DEC 12 PM 3: 45 SECRETARY OF STATE TALLAHASSEE EL COLO

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COVER LETTER

TO:

Registration Section Division of Corporations

cation arrange	Das Kapital Capital, LLC	
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Existence, ar	I "Application by Foreign Limited Liability Compan nd check are submitted to register the above referenc	y for Authorization to Transact Business in Florida," Certificate of ed foreign limited liability company to transact business in Florida.
Please return	all correspondence concerning this matter to the fol	lowing:
	Alexis Ohanian	
	Name	e of Person
	Das Kapital Capital, LLC	
	Firm	/Company
	7703 Bold Lad Rd.	
	^	address
	Palm Beach Gardens, FL 33418	
	City/State	and Zip Code
	mrhodes@citrincooperman.com	
	E-mail address: (to be used fo	or future annual report notification)
For further in	nformation concerning this matter, please call:	
Mic	chael Rhodes	212 697-1000 ut ()
	Name of Contact Person	Area Code Daytime Telephone Number
Div Reg P.O	ision of Corporations gistration Section Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a	a check for the following amount:	
	\$125.00 Filing Fee \$\simega\$ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Das Kapital Capital, LI	LC Limited Liability Company, must include "Limite			
(Name of Foreign	Limited Liability Company, must include "Limite	ed Liabilit	y Company, " T. L. C.," or "LLC")	
f name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	unda The a	ternate name must include "Limited Liability	y Company," "L.L.C," or "LLC")
Delaware		3	27-2754506	
(Jurisdiction under the law of w	hich toreign limited liability company is organized)	.,	(FEI mamber,	if applicable)
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration ine penalty	i) hability)	<u></u>
7703 Bold Lad Rd.		6	7703 Bold Lad Rd.	
(Street Address of	Principal Office)	6. (Mailing Address)		1)
Palm Beach Gardens, l	FL 33418		Palm Beach Gardens, FL 33418	
				
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT :	acceptable)	
				70 Z
Name:	Alexis Ohanian .			BIB DEC SECRET ALLAH
	7703 Bold Lad Rd.			TART HASS
Office Address:	7703 Bold Edd Rd.		.	
	Palm Beach Gardens		33418 Florida	PH 3
	(City)		(Zip code)	ORIDI

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.

(Roustered agent's signature)

itle or Capacity:	I address of the person(s) who has/have authority to manage is/are: Name and Address:				
lember	Alexis Ohanian				
	7703 Bold Lad Rd. Palm Beach Gardens, Ft. 33418				
<u> </u>					
	SE CRE				
	SECRETARY				
	LOZI				

(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 D*partment of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Alexis Ohanian

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "DAS KAPITAL CAPITAL, 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 TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2018.



Authentication: 203974243

Date: 11-27-18