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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)

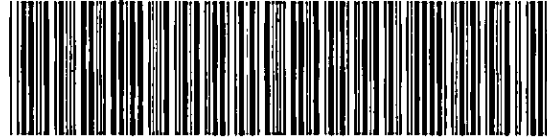
Certified Copies _____ Certificates of Status _____

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FILED
2019 MAR -4 PM 3:31
STATE
TALLAHASSEE, FL

S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2019

GASTON R. CORTES, CPA
9300 S. DADELAND BLVD
SUITE 600
MIAMI, FL 33156

SUBJECT: THE TWIN FISH GROUP, LLC
Ref. Number: W19000009179

We have received your document for THE TWIN FISH GROUP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather
Regulatory Specialist III

Letter Number: 519A00002082

RECEIVED
MAR 04 2019

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. THE TWIN FISH GROUP, LLC
(Name of Foreign Limited 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 Florida. The alternate name 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. 27-3514442 (FEI number, if applicable)

4. 01/01/2019
(Date first transacted business in Florida, if prior to registration.)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

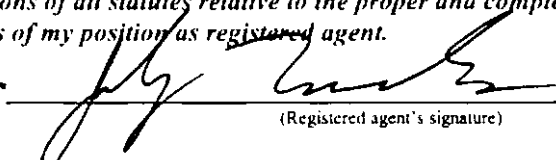
5. PO BOX 1190 (Street Address of Principal Office) 6. _____ (Mailing Address)
CHARLES TOWN, WV 25414

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
 Name: JEFFREY TARBOULOS, KSDT & COMPANY
 Office Address: 9300 S DADELAND BLVD STE 600
MIAMI, Florida 33156
(City) (Zip code)

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 STATE
 TALLAHASSEE, FL

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)

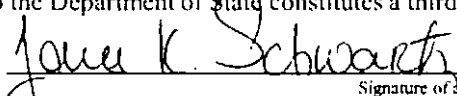
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>VP</u>	<u>ALAN N ZINSTEIN</u> <u>402 S SAMUEL ST</u> <u>CHARLES TOWN, WV 25414</u>	_____	_____
<u>P</u>	<u>JANE K SCHWARTZ</u> <u>402 S SAMUEL ST</u> <u>CHARLES TOWN, WV 25414</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

Jane K Schwartz

Typed or printed name of signer

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That The Twin Fish Group, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is December 4, 2009; 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:
February 19, 2019*



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