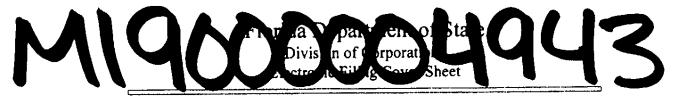
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## Foreign Limited Liability Company JMP CAPITAL ADVISORS LLC

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MAY 20 2019

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Peter E. O'Rourke

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

(Name of Fore	SORS LLC ign Limited Liability Company; mus	a include "Limited Liabil	ity Company," "L.L.C.," or "LLC	C.")
.iability Company," "L.L.C,	iternate name adopted for the purpose or "LLC.")		n Florida. The alternate name m	ust include "Limited
Delaware		3. 82-5176948	***	
company is organized)	of which foreign limited liability		(FEI number, if applicable)	
I. <u>N/A</u>	(Date first transacted busine (See sections 605.0904 & 605.	ss in Florida, if prior to re 0905, F.S. to determine p	gistration.) enalty liability)	
3910 DRESDEN STR	EET, KENSINGTON, MD 2089:	5		, <u>5</u>
	(Street Address of I	•		
S. 3910 DRESDEN STRI	EET, KENSINGTON, MD 20895	<u> </u>		 
				•:
	(Mailing /	Address)		=======================================
7. Name and street addres	ss of Florida registered agent: (P.	O. Box NOT acceptab	ole)	T0: 34
Name:	HUBCO REGISTERED AGE	NT SERVICES, INC.		Ē
Office Address:	155 OFFICE PLAZA DRIVE,	IST FLOOR		
	TALLAHASSEE		, Florida 32301	
	(City)		(Zip code)	
Having been namea as re	egistered agent and to accept services. I hereby accept the annalm	iment as registered ago	ent and agree to act in this co	apacity.I fur 📑
to complywith the provisi	ons of all statutes relative to the my position of registerest agent.	belief!		· · · · · · · · · · · · · · · · · · ·
to complywith the provision accept the obligations of	lons of all statutes relative to the my position of registerest agent.  (Registered B. HUBBARD-PRESIDE	tered agent's signature) NT- HUBCO REGISTE	RED AGENT SERVICES, INC	
to complywith the provision accept the obligations of the obligations of the same, title or cap	lons of all statutes relative to the my position of registered agent.  (Regist BRUCE B. HUBBARD-PRESIDE) acity and address of the person(s)	tered agent 's signature) NT- HUBCO REGISTE ) who has/have authority	RED AGENT SERVICES, INC y to manage is/are:	
to complywith the provision complywith the provision of the obligations of the control of the co	lons of all statutes relative to the my position of registerest agent.  (Registered B. HUBBARD-PRESIDE	tered agent 's signature) NT- HUBCO REGISTE ) who has/have authority	RED AGENT SERVICES, INC y to manage is/are:	
to complywith the provision of accept the obligations of accept the obligations of a second s	lons of all statutes relative to the my position of registered agent.  (Regist BRUCE B. HUBBARD-PRESIDE) acity and address of the person(s)	tered agent's signature) NT- HUBCO REGISTE ) who has/have authorit RT, TAKOMA PARK,	RED AGENT SERVICES, INC y to manage is/are: MD 20912	
8. The name, title or cap MEMBER: MORGAN MEMBER: PETER E. C	ons of all statutes relative to the my position of registered agent.  (Regist BRUCE B. HUBBARD-PRESIDE acity and address of the person(s)	nered agent's signature) NT- HUBCO REGISTE ) who has/have authorit RT, TAKOMA PARK, REET, KENSINGTON	RED AGENT SERVICES, INC y to manage is/are: MD 20912 I, MD 20895	
8. The name, title or cap MEMBER: MORGAN MEMBER: PETER E. C MEMBER: JONATHA  9. Attached is a certificate	Register of the my position of registered agent.  (Register of the person of the perso	tered agent's signature) NT- HUBCO REGISTE ) who has/have authorit RT, TAKOMA PARK, REET, KENSINGTON //E, WEST NYACK, N avs old, duly authentica	RED AGENT SERVICES, INC y to manage is/are: MD 20912 I, MD 20895 Y 10994 ted by the official having cust	C.

Typed or printed name of signee

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JMP CAPITAL ADVISORS 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 THIRTEENTH DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JMP CAPITAL ADVISORS LLC" WAS FORMED ON THE THIRTEENTH DAY OF APRIL, A.D. 2018.

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

at corp.delaware.gov/auti

Authentication: 202812472

Date: 05-13-19