

FREDERICK R. MACLEAN
ANNE B. MACLEAN
CHRISTOPHER J. EMA
LAURA G. MACLEAN
BRIAN V. BERGMAN
ADAN A. AULET, JR.*
AIMEE K. ARCE

MACLEAN & EMA P.A.
Attorneys and Counselors at Law

* ALSO ADMITTED IN ILLINOIS

December 5, 2019

Transmitted via: **FEDERAL EXPRESS**

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

FILED
2019 DEC -6 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Advisors' Academy Holdings, LLC

Dear Sir or Madam:


Enclosed please find the following:

1. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
2. Certificate from the State of Delaware that Advisors' Academy Holdings, LLC was duly formed under the laws of the State of Delaware and is in good standing; and
3. Check #35795 in the amount of \$125.00, payable to the Florida Department of State, for payment of the filing fee for the Application and Designation of Registered Agent.

Should you have any questions concerning the enclosed, please feel free to call me.

Very truly yours,

MACLEAN & EMA, P.A.


Adan A. Aulet, Jr.
For the Firm

encls/as noted

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. ADVISORS' ACADEMY HOLDINGS, 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. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized)
3. 81-3652263 (FEI number, if applicable)

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

5. 6550 N. Federal Highway (Street Address of Principal Office)
Suite 500
Fort Lauderdale, FL 33308
6. 6550 N. Federal Highway (Mailing Address)
Suite 500
Fort Lauderdale, FL 33308

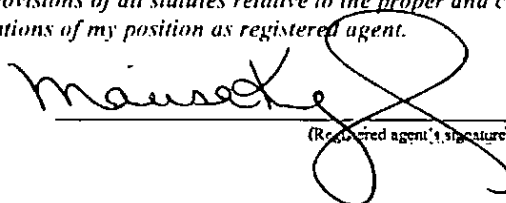
TALLAHASSEE, FLORIDA
2019 DEC - 6 PM 2:06

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

Name: COGENCY GLOBAL INC.
Office Address: 115 N. Calhoun Street, Suite 4
Tallahassee, Florida 32301
(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)
Marisa Kugelmann
Assistant Secretary

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Name and Address:
 Manager Name: DAVID SCRANTON
 Member Address: 6550 N. Federal Highway
 Authorized Suite 500
 Person Fort Lauderdale, FL 33308
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Title or Capacity: Name and Address:
 Manager Name: STEVEN P. COX
 Member Address: 6550 N. Federal Highway
 Authorized Suite 500
 Person Fort Lauderdale, FL 33308
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

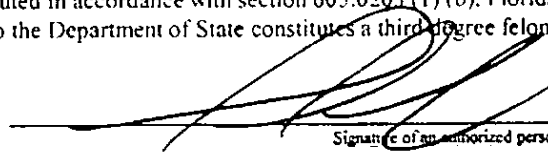
Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

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 FLORIDA SECRETARY OF STATE

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

STEVEN P. COX, MANAGER

 Typed or printed name of signer

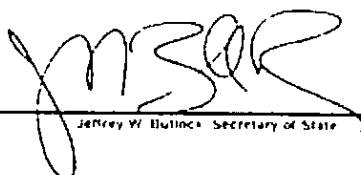
Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ADVISORS' ACADEMY HOLDINGS, 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 SECOND DAY OF DECEMBER, A.D. 2019.

2019 DEC -6 PM 2:06
TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State

5914716 8300

SR# 20198378885

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204117764

Date: 12-02-19