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2020 JUL 21 PH 4:44

45 Mb2/20 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 360936 7965870

AUTHORIZATION: Smelle le man

COST LIMIT : \$ \P25...00

ORDER DATE : July 20, 2020

ORDER TIME : 9:34 AM

ORDER NO. : 360936-005

CUSTOMER NO: 7965870

FOREIGN FILINGS

NAME: 13FH ACQUISITIONS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: ____

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACT RUSINESS IN THE STATE OF FLORIDA:

I. 13FH Acquisitions, L (Name of Force)	LC eign Limited Liability Company: mu	ıst include "l.	imited Liability Company.	" "L.L.C.," or "	LLC.")	
(If name unavailable, enter al	Iternate name adopted for the purpos					Limited
Liability Company," "L.L.C.	" or "LLC,")	0.0	0770405			
2. Delaware	2778495	(FEI number, it applicable)				
company is organized)	of which foreign limited liability		(Fita number.	it applicable)		
4.					<i>ب</i>	
	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida	. if prior to registration.)	0 .3	020	
5. 848 Brickell Avenue,			y determine penanty national	'' r	2020 JUL 21	•
J	<u> </u>			_		
Miami, Florida 33131						•
OAO Defeliell A	(Street Address of	Principal Off	ice)		?. PH	
6. 848 Brickell Avenue,	PH1	_				•
Miami, Florida 33131	1				PH 4: 4-1	
	(Mailing	Address)	-		<i>j•</i>	
7 Name and street address	ss of Florida registered agent: (P	O Box No	T acceptable)			
	Timothy Sanders	.O. DOX <u>IN</u>	<u>or</u> acceptable)			
Name:	Timothy Sanders					
Office Address:	848 Brickell Avenue PH1	_				
	Miami		, Florida 331	131		
	(City)			Zip code)		
designated in this applicate complywith the provision	stance: egistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the my position as registered agent.	tment as reg proper and	gistered agent and agree	e to act in this	capacity. I fi	urther agree
	(Registr	ered agent's s	gnature)			
8. The name, title or cana	acity and address of the person(s)) who has/h:	ive authority to manage i	s/are·		
Arnaud Karsenti, Mana		,	···g· ·	J. 111 01		
848 Brickell Avenue, Pt						
Miami, Florida 33131						
		ertiticate is	in a foreign language, a l			
	Signature	of an author	ized person			
This document is executed submitted in a document to	I in accordance with section 605.0 the Department of State constitu	0203 (1) (b) utes a third d	, Florida Statutes. I am a legree felony as provided	ware that any:	false informati 55, F.S.	ion

Arnaud Karsenti



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

DELAWARE, DO HEREBY CERTIFY "13FH ACQUISITIONS, 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 TWENTIETH DAY OF JULY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "13FH

ACQUISITIONS, LLC" WAS FORMED ON THE ELEVENTH DAY OF DECEMBER, A.D.

2018.

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

Authentication: 203313355

Date: 07-20-20

7188160 8300 SR# 20206312556