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~ 1 7 2021

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 964642 8257319

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : August 16, 2021

ORDER TIME : 9:38 AM

ORDER NO. : 964642-080

CUSTOMER NO: 8257319

FOREIGN FILINGS

NAME: GJC FUNDING XII, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

YX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: _	GJC Funding	g XII, LLC							
	Name of Lim	ited Liability	Comp	any					
The enclosed " Existence, and	Application by Foreign Limited Liability Corcheck are submitted to register the above refe	npany for Au crenced foreig	thoriza gn limi	ation to Transact Business in Florida," Certificate of ited liability company to transact business in Florida.					
Please return a	Il correspondence concerning this matter to th	e following:							
	Peggy Cassin								
	Name of Person Global Jet Capital								
Firm/Company									
	83 Wooster Heights Road, Suite 503								
		Address							
	Danbury, CT 06810								
	City/	State and Zip	Code						
	pcassin@globaljetcapital.com								
	E-mail address: (to be us	ed for future a	annual	report notification)					
For further info	rmation concerning this matter, please call:								
Peggy	Cassin	203 at (}	448-4459					
	Name of Contact Person	Area	Code	Daytime Telephone Number					
Divisio Regist P.O. B	ING ADDRESS: on of Corporations ration Section lox 6327 assee, FL 32314			STREET ADDRESS; Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
Enclos Please	ed is a check for the following amount: make check payable to: FLORIDA DEPAR	TMENT OF	STAT	ΓE					
S 1:	25.00 Filing Fee			Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy					

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:

(realise of Foreign	n Limited Liability Company; must include "Limit	ed Liability (Company," "E.L.C.," or "LLC.")		
name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	lorida. The alter	mate name must include "Limited Liability C	ompany," "L.L.C," or "I	
Delaware			86-1657981		
(Jurisdiction under the law of which foreign limited liability company is organized)		3	(FEI number,	<u> </u>	
			if applicable)		
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) nine penalty lia	bility)	_	
83 Wooster Heights Road, Suite 503 (Street Address of Principal Office)		8 ر	33 Wooster Heights Road, S	uite 503	
		6	(Mailing Address)		
Danbury, CT 06810			Danbury, CT 06810		
		_			
_		_			
Name and street addre	ss of Florida registered agent: (P.O. Bo)	NOT acc	ccptable)	202 '.	
				: 6 5	
Name:	Corporation Service Company				
Name:		<u> </u>	. <u></u>	17	
Name: Office Address:	Corporation Service Company 1201 Hays Street		<u></u>	17 Aii	
	1201 Hays Street			17 Aii II:	
			32301 , Florida(Zip code)	17 Aii II: 44	

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.

> Corporation Service Company By: (Registered agent's signature)

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: Title or Capacity: Name and Address: Name: Paul Rerick Name: Shawn Vick Manager Manager Manager Address: 83 Wooster Heights Rd, #503 83 Wooster Heights Rd, #503 Member ☐ Member Danbury, CT 06810 Danbury, CT 06810 Authorized Authorized Person Person Other____ Executive Chairman Other Other Name: David Labrozzi Manager Manager Address: 83 Wooster Heights Rd, #503 83 Wooster Heights Rd, #503 Member Member Danbury, CT 06810 Danbury, CT 06810 Authorized Authorized Person Person Vice President Other Chief Executive Officert Other Other Name: Christopher Paul Name: Susan Marr Manager Manager Address: ____ - 83 Wooster Heights Rd, #503 Address: _____ 83 Wooster Heights Rd, #503 ☐ Member Danbury, CT 06810 Danbury, CT 06810 Authorized Authorized Person Person Other Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Christopher Paul

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GJC FUNDING XII, 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 SIXTEENTH DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GJC FUNDING XII, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JANUARY, A.D. 2021.

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

Authentication: 203930366

Date: 08-16-21

4806909 8300 SR# 20212991843