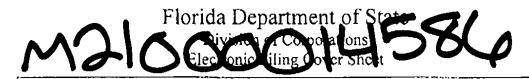
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Division of Corporations



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Fax Number : (850)617-6383

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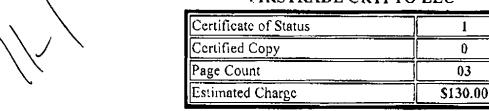
Account Name : ALLSTATE CORPORATE SERVICES CORP

Account Number : 120040000031 Phone : (800)906-9220 Fax Number : (800)906-9880

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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	MUUI CSS:			

Foreign Limited Liability Company FIRSTRADE CRYPTO LLC



Electronic Filing Menu

Corporate Filing Menu

Help

NOV 03 2021

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	TYON 6050902, PLORIDA STATUTES, THE FOLD SINESS IN THE STATE OF FLORIDA:	ONING IS SUDMITTED TO REGISTER	N FOREIGN LIMITED LIMITITY
FIRSTILADE CRYPTO			
(Name of Foreign	Limited Liability Company, must include "Limited Lie	ibility Company: "L.U.C.," or "ELC.")	-
illiname ungvailable, enter alternate	name adapted for the purpose of transacting business in Florida	The alternate name must include "Limited Lisbi	ky Смярапусти, E.C.Tor T.I. СС1
DELAWARE 2.		3	
(durishmian under the law of w	hich foreign limited liability company is organized)	(FEI number,	st opplicable)
4	(Dule liest represented interiors) in Francia, if provincing to (See sections 405 1800) & 605 1800), F.S. to determine p	Iraikin.)	_
			CONTROL 200 (201 1 N. 124) 12 2 2 2 1 1
3505 LAKE LYNDA 5. OStreet Address of Printspal (1000)	DRIVE, SUITE 200, ORLANDO. FL 32817	6. Whiting Address:	SUITE 200, ORLANDO, FL 32817
 		Make Supply to the first resources on specimen expense and continues and desired	
7. Name and street address	ss of Florida registered agent: (P.O. Box. N	OT acceptable)	2021 NO SECRE FALL A
Name:	DEFFREY M MORTIZ	·	FILL FALL NV-1
Office Address:	3584 VALLEYVIEW DR		PH PH ED
	KISSIMMEE	34746 , Florida	1:45 1:45
	(City)	(Zip code)	
Registered agent's accep-		cess for the above stated limited li	abillty company at the place

(((H21000405447 3)))

8.	For	initial	indexing	purposes,	list names,	title or c	apacity and	addresses :	of the primary	/ members/man	agers or pe	rsons author	ized to
na	nage	[up to	six (6) to	tal]:									

Title or Capacity:	Name and Address:	Title or Canacity	2	Name and Address:
□Manager	Name:	□Manager	Name:	
≣ Member	Address: 3505 LAKE LYNDA DRIVE	□Member	Address:	
□Authorized	SUITE 200	☐ Authorized	_	
Person	ORLANDO, FL 32817	Person		
Other	□Other	□Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized	<u> </u>	□Authorized		
Person		Person		
Other	Other	□ Other		Other
⊡Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized '		□Authorized		
Person		Person		
□Other	Other	Other		□Other

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 \$.817.155, F.S.

	Signiture of an authorized person	
STEVEN WEISS		

(((H210004054473)))

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "FIRSTRADE CRYPTO 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 FIRST DAY OF NOVEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIRSTRADE CRYPTO LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF NOVEMBER, A.D. 2020.

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

Authentication: 204565855

Date: 11-01-21