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Division of Corporations

Fax Number : (850)617-6383

From:

Email Address:

ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Foreign Limited Liability Company
Highpoint Capital SPE1, LLC

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COVER LETTER

TO:	Registration S Division of Co								
CHID FE	ect.		Hig	hpoint Cap	ital SPE1, LL	С			
SUBJECT: Name of Lim					nited Liability Company				
The en Exister	closed "Applicat ace, and check ar	ion by Forei e submitted	gn Limited Liability to register the above	/ Company e referenced	for Authoriza foreign limit	tion to Transacted liability con	t Business in Florida," apany to transact busine	Certificate of ess in Florida.	
Please	return all corresp	oondence cor	ncerning this matter	to the follo	wing:				
			E	Fredric Grue	ler, Esq.				
				Name	of Person				
		<u>.</u>		Firm/C	отралу				
			3	3 East Car	er Street				
				Ad	dress			_	
			ı	funtington	n, NY 11743				
			- 	City/State a	ınd Zip Code				
				gruder@gn	ıderlaw.com				
			E-mail address: (to	be used for	future annual	report notifical	tion)		
For fur	ther information	concerning	this matter, please o	all:					
	Fredric Grude	ī		at	631	784-7717			
	<u></u>	Name of	Contact Person	at	Area Code	Daytime	Telephone Number		
	MAILING A Division of Co Registration S P.O. Box 632 Tallahassee, F	orporations ection 7				STREET AD Division of Co Registration S Clifton Buildi 2661 Executiv Tallahassee, F	orporations ection ng re Center Circle		
	Enclosed is a complete Please make of \$125.00 F	heck payable	following amount: to: FLORIDA DE \$130.00 Filing Certificate	g Fee &	\$155.00	TE Filing Fee & ed Copy	S160.00 Filing F of Status & Cert		

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

	Highpoint Capital S			
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability Comp	pany," "L.L. C.," or "LLC.")	
unaveilable, enter alternate i	neme adopted for the purpose of transacting business in Plo	cids. The altereste	name must include "Limited Liability Company	y,""L.L.C," or "LLC.")
			5275	
laware			(Fhi number, if applicab	
urisdiction under the law of w	visch foreign limited Habibly company is organized)		(у да полиост, и вуриско	æ j
	(Date first transacted bisiness in Florida, If prior to (See sections 605 9904 & 603,0905, F.S. to determ	registration >		
)15 Washington Stre	eet	6015	Washington Street	
(Street Address of	Principal Office)	v	(Mailing Address)	
ollywood, FL 33023		Holly	ywood, FL 33023	
				
				TAL'S
ame and street addre	ess of Florida registered agent: (P.O. Bo)	NOT accep	table)	SEC.
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	ess of Florida registered agent: (P.O. Box Corporate Creations Network Inc.	NOT accep	table)	SECRETARY TALL AHASSE
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	Corporate Creations Network Inc. 801 US Highway 1	NOT accep	table)	SECRETARY OF STA
Name:	Corporate Creations Network Inc. 801 US Highway 1		 	SECRETARY OF STATE ALL AHASSEE. FLORIDA
Name:	Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach	NOT accep	 	SECRETARY OF STATE ALL AHASSEE. FLORIDA
Name:	Corporate Creations Network Inc. 801 US Highway 1		 	SECRETARY OF STATE ALLI AHASSEE, FLORIDA
Name: Office Address:	Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City)			AH II: 45 FSTATE FLORIDA
Name: Office Address: istered agent's acce	Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City)	process for the	33408 , Florida(Zip code) he above stated limited liability	FSTATE FLORIDA company at the place
Name: Office Address: stered agent's acce	Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City) prance: registered agent and to accept service of	process for the	33408, Florida(Zip code) the above stated limited liability agent and agree to act in this ca	FLORIDA company at the place upacity. I further agree
Name: Office Address: istered agent's acce ing been named as i	Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City)	process for the	33408, Florida(Zip code) the above stated limited liability agent and agree to act in this ca	FLORIDA company at the place pacity. I further agree
Name: Office Address: istered agent's acce ing been named as is gnated in this applic tomply with the provi	Corporate Creations Network Inc. 801 US Highway 1 North Palm Beach (City) prance: registered agent and to accept service of action, I hereby accept the appointment of sions of all statutes relative to the prope.	process for the segment of the segme	33408, Florida(Zip code) the above stated limited liability agent and agree to act in this ca	FLORIDA company at the place spacity. I further agree and I am familiar with

Fredric Gruder

	Name and Address:	Title or Capacity	i	Name and Address
]Manager	Name: Fredric Gruder	□Manager	Name:	· · · · · · · · · · · · · · · · · · ·
	Address: 33 E Carver St., Suite 4	□Member	Address:	·
Authorized	Huntington NY 11746	Authorized		
Person		Person		·
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		Person		
Person		□ Other		`
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Typed or printed name of signor

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "HIGHPOINT CAPITAL SPEI, 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 THIRD DAY OF FEBRUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HIGHPOINT CAPITAL SPE1, LLC" WAS FORMED ON THE ELEVENTH DAY OF DECEMBER, A.D. 2019.

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

at corn delaware soy/auth

Authentication: 202563868

Date: 02-03-22