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ALIEN

1. LIGHTANCHOR LTD
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIGHTANCHOR LTD, a British Virgin Islands business company
(Name of Alien Business Organization or Financial Institution)

Dear Sir or Madam:

The enclosed Designation of Registered Agent and Registered Office for Alien Business Organization or Financial Institution and fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marc L. Faust, Esq.

(Name of Person)

c/o Katz Barron

(Firm/Company)

2699 S. Bayshore Drive, 7th Floor

(Address)

Miami, Florida 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Marc L. Faust, Esq.

(Name of Person)

at (305) 856-2444

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☒ \$43.75 Filing Fee & Certified Copy

**DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR
ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION**

PURSUANT TO SECTION 607.0505 OR 655.0201, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. LIGHTANCHOR LTD, a British Virgin Islands business company
(Name of alien business organization or financial institution)

2. British Virgin Islands 3. _____
(State or country under which entity is organized) (FEI Number, if applicable)

c/o AMS Trustees Limited, Sea Meadow House, Blackburne Highway, P.O. Box 116,
4. Road Town, Tortola, British Virgin Islands, VG 1110
(Principal office address)

5. Name and Florida Street address of registered agent.

Marc L. Faust, Esq., c/o Katz Barron
2699 S. Bayshore Dr., 7th Floor
Miami, Florida 33133

6. The street address of the registered office and the street address of the business office of the registered agent are identical.

7. Eduardo Saverin
(Signature of chairman, vice chairman, or officer)

8. Eduardo Saverin, Sole Director
(Name and capacity of person signing in number 7 above)

9. Signature of registered agent: [Signature]

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505 or 655.0201, Florida Statutes.

[Signature]
(Registered agent accepting appointment)
Marc L. Faust, Esq.

April 16, 2018
(Date)

**THE FILING OF THIS FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT
AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF
FLORIDA.**

FILING FEE \$35

Make checks payable to Florida Department of State and mail to:
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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