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	Account Number		<u> </u>
	Phone	: (850)521-0821	<u> </u>
	Fax Number	: (850)558-1515	7: 45 4: 45
*Enter	the email address	s for this business entity to be (used for future
anr	nual report maili	ngs. Enter only one email address	please.**

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Foreign Limited Liability Company LEASE CORPORATION INTERNATIONAL LIMITED LIABILITY

Certificate of Status	0
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Page Count	04
Estimated Charge	\$125.00

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Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address Registration Division of The Centre 2415 N. Mo Tallahassec	Secti Corp of Ta onroe	oration Hahas Street	see	-10					

☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee &

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Enclosed is a check for the following amount.

☐ \$125.00 Filing Fee

Please make check payable to. FLORIDA DEPARTMENT OF STATE

☐ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

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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:

	nternational LLC					_
(Name of Foreign	Limited Liability Company, must include "Limited	d Liability Company," '	'L.L C.," or "LLC.")			
f name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	orida. The alternate name r	nusi include "Limited L	ability Company.	F	"LLC.
Delaware		3.		- -	ACN REE	. •
(Jurisdiction under the law of v	which foreign limited liability company is organized)	<u>-</u>	(FIE num)	per, il applicable)	AG	
10-01-2020				.	$\overline{\omega}$	
	(Date first transacted business in Fiorida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	registration) ne penalty liability)		:	PM	
101 S Fort Lauderda		c/o LCI O _i	perations, Grou	nd Floor.	ا: ا	•••
treet Address of Principal Office)		(Mailing	(Address)	ن. تح	-01	_
Unit 806, Fort Lauderdale		6 George's Dock. IFSC, Dublin 1				
Florida 33316	<u> </u>	Ireland, D	01 K5C7			_
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)				
. Name and <u>street addre</u> Name:	ss of Florida registered agent: (P.O. Box Corporation Service Company	NOT acceptable)				
	_ , ,	NOT acceptable)				
Name:	Corporation Service Company		32301 orida			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree 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: Option (Registered agent's signature)

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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:
■Manager	Name. Adamantios Tomazos	□Manager	Name:
□Member	Address: 255 East 49th Street	□Member	Address:
□Authorized	Apt 31a	□Authorized	
Person	NYC 10017, USA	Person	920 TOV
Other		□Other	Oυher
□Manager	Name. Michael Platt	□Manager	Name.
□Member	Address. 101 S Fort Lauderdale Beach	□Member	Address. 5
□Authorized	Unit 806. Fort Lauderdale	□Authorized	
Person	Florida 33316, USA	Person	
Other_CEO_	□ Other	Other	□Other
□Manager	Name	⊡Manager	Name.
□Member	Address. 21 Erpingham Road	□Member	Address.
□Authorized	London, SW15 1BE	□Authorized	
Person	United Kingdom	Person	
Other Vice Presi	dent 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 s.817.155, F.S.

	The state of the s
Signature of an aud	nonized person
Jaspal Jandu	
Typed or printed n	ame of signee

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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "LEASE CORPORATION INTERNATIONAL 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 TWELFTH DAY OF NOVEMBER, A.D. 2020

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEASE! CORPORATION INTERNATIONAL LLC" WAS FORMED ON THE SIXTEENTH DAY OF SEPTEMBER, A.D. 2011.

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

5039250 8300 SR# 20208362364

Authentication: 204063041

Date: 11-12-20