



2019 SEP 25 A 11:55

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL <u>7-16-49</u> , the undersigned for applies for a Certificate of Registration to transact business in the purpose submits the following statement:		
1. The name of the limited liability company is:		
BLOCKFI TRADING LLC		
Is this company organized in its state or country of formation a	s a low-profit limited liability co	ompany? Yes No 🔀
The name, if different, under which it proposes to register and	transact business in Rhode Isl	and is:
The LLC is organized under the laws of: DELAWARE		
3. The date of its organization is: 05/28/2019		
And the period of its duration is: CHECK ONE BOX ONLY		
Perpetual (on-going)		
Date certain for dissolution		<u> </u>
4. The name and address of the resident agent/office in Rhode	e Island is:	
Agent Name National Registered Agents, Inc.		
Street Address (<u>NOT</u> a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A		
City/Town East Providence	State RHODE ISLAND	Zip Code
		02914
The purpose or purposes which it proposes to pursue in the LENDING	e transaction of business in Rh	ode Island are:
	Check the bo	ox to indicate an attachment

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

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6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.		
7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is:		
251 EAST 51st STREET, SUITE 8A NEW YORK, NY 10022		
8. The mailing address for the limited liability company is:		
251 EAST 51st STREET, SUITE 8A NEW YORK, NY 10022		
9. Management of the Limited Liability Company:		
The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX		
By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)		
By one (1) or more managers (List managers below)		
MANAGER ADDRESS		
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.		
11. Date when this application for Certificate of Registration will be effective: CHECK ONE BOX ONLY		
Later effective date (Date must be no more than 90 days from the date of filing)		
Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.		
Type or Print Name of LLC Date		
BLOCKFI TRADING LLC 09/19/2019		
Signature of Authorized Person		

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BLOCKFI TRADING 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 TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLOCKFI TRADING LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF MAY, A.D. 2019.

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

TAY OF THE PROPERTY OF THE PRO

7439285 8300

SR# 20197175680

You may verify this certificate online at corp.delaware.gov/authver.shtml

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Authentication: 203649478

Date: 09-23-19