

Secretary of State

Application to Register a Foreign Limited Liability Company (LLC)

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FILED

Secretary of State State of California

OCT 23 2018

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IMPORTANT — Read Instructions before completing this form.

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed. See Instructions.

Filing Fee - \$70.00

Copy Fees - First page \$1.00; each attachment page \$0.50;

Certification Fee - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to https://www.ftb.ca.gov.

This Space For Office Use Only

1a. LLC Name (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)

BREAKAWAY	CAPITAL	FINANCE.	110
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1b. California Alternate Name, If Required (See Instructions – Only enter an alternate name if the LLC name in 1a not available in California.)

LLC-5

2. LLC History (See Instructions – Ensure that the formation date and jurisdiction match the attached Certificate of Good Standing.)

a. Date LLC was formed in home jurisdiction (MM/DD/YYYY)

b. Jurisdiction (State, foreign country or place where this LLC is formed.)

DELAWARE

c. Authority Statement (Do not alter Authority Statement)

This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2b.

3. Business Addresses (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Street Address of Principal Executive Office - Do not enter a P.O. Box 1901 AVENUE OF THE STARS, STE 360	City (no abbreviations) LOS ANGELES	State CA	Zip Code 90067
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box 1901 AVENUE OF THE STARS, STE 360	City (no abbreviations) LOS ANGELES	State CA	Zip Code 90067
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code

4. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation) WARREN	Middle Name	Last Name WOO			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 1901 AVENUE OF THE STARS, STE 360	City (no abbreviations) LOS ANGELES	•	State CA	Zip Cod 9006	-

CORPORATION - Complete Item 4c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 4a or 4b

5. Read and Sign Below (See Instructions. Title not required.)

I am authorized to sign on behalf of the foreign LLC.

Sunny E. Lee, Authorized Person

Type or Print Name

Signature

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BREAKAWAY CAPITAL FINANCE, 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 OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BREAKAWAY CAPITAL FINANCE, LLC" WAS FORMED ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2018.

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

7056078 8300 SR# 20187287102

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

Authentication: 203669114

Date: 10-23-18