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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : Vcorp Services, LLC
Account Number : 120080000067
Phone : (845) 425-0077
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FOREIGN PROFIT/NONPROFIT CORPORATION
The Mint Capital Inc

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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March 21, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VCORP SERVICES, LLC

SUBJECT: THE MINT CAPITAL FL
REF: W19000027824

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

FAX Aud. #: H19000094282
Letter Number: 419A00005611

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

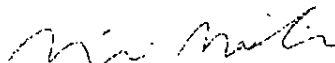
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. The Mint Capital Inc
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
The Mint Capital FL Inc
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. New York
(State or country under the law of which it is incorporated)
3. 82-1431315
(FEI number, if applicable)
4. 5/5/2017
(Date of incorporation)
5. _____
(Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 412 North Main Street, Suite 101A, Monroe, NY 10950
(Principal office address)

(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Vcorp Services, LLC
Office Address: 5011 South State Road 7, Suite 106
Davie, Florida 33314
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.



(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Joel Lieberman

Address: 412 N Main Street #101A

Monroe, NY 10950

Vice President: _____

Address: _____

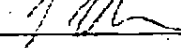
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. Joel Lieberman, President

(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of THE MINT CAPITAL INC was filed on 05/05/2017, under the name of MINT HOME FUNDING INC, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A certificate changing name to THE MINT CAPITAL INC was filed on 11/03/2017.

I further certify that no other documents have been filed by such corporation.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 19th day of March
two thousand and nineteen.



Whitney Clark
Deputy Secretary of State

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TALLAHASSEE, FLORIDA