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	COST LIMIT	:	\$ 160.00				
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CONTACT PERSON:	Carina L. Dunl	.ap	EXT# 529	951			

EXAMINER:

#### COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: M-311 MERIDIAN ASSOCIATES, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida Existence, and check are submitted to register the above referenced foreign limited liability company to transact business."	," Certificate of iness in Florida
Please return all correspondence concerning this matter to the following:	
Camilo Miguel, Jr.	
Name of Person	
MC Manager LLC	
Firm/Company	
1691 Michigan Avenue, Ste. 215	20II
Address	
Miami Beach, FL 33139	2014 JAN 10 SEGRETARI BLUARIASS
City/State and Zip Code	
cmigueljr@yahoo.com	
E-mail address: (to be used for future annual report notification)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
For further information concerning this matter, please call:	. 1444
Camilo Miguel, Jr. at (305) 531-2426	_
Name of Person Area Code Daytime Telephone Number	
MAILING ADDRESS:  Division of Corporations  Registration Section  P.O. Box 6327  Tallahassee, FL 32314  STREET ADDRESS:  Division of Corporations  Registration Section  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\Bigsiz\$ \$\sigma\$ \$\frac{1}{2}\$.00 Filing Fee  \Bigsiz\$ \$\Bigsiz\$ \$\Bi	

### 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: M-311 MERIDIAN ASSOCIATES, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5 1691 Michigan Avenue, Suite 215 Miami Beach, FL 33139 (Street Address of Principal Office) 6. 1691 Michigan Avenue, Suite 215 Miami Beach, FL 33139 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: MC Manager, LLC (MGR) 1691 Michigan Avenue, Suite 215 Miami Beach, FL 33139

8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Camilo Miguel, Jr., President

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

M-311 MERIC	DIAN ASSOCIATES, LLC	
If unavailable, t	the alternate to be used in the state of Florida is:	
2. The name an	nd the Florida street address of the registered agent and office are:	N.S.
	Corporation Service Company	
	(Name)	ARY O
	1201 Hays Street	2 TO 18 1
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee FL 32301	
	City/State/Zip	
liability company registered agent statutes relating	amed as registered agent and to accept service of process for the above so the place designated in this certificate. I hereby accept the appoint and agree to act in this capacity. I further agree to comply with the programment of the proper and complete performance of my duties, and I am familia factions of my position as registered agent as provided for in Chapter 605.  Carina L  (Signature)  Carina L  Asst. Vice	nent as ovisions of all r with and 5, Florida
	\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

# Delaware

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#### The First State

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

DELAWARE, DO HEREBY CERTIFY "M-311 MERIDIAN ASSOCIATES, 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 SEVENTH DAY OF JANUARY, A.D. 2014.

5460480 8300

140018230

Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 1039201

DATE: 01-07-14

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