000003628

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	cument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



700262362927

8/29/14



ACCOUNT NO. : 12000000195

REFERENCE : 263110 7807252

AUTHORIZATION : 1

COST LIMIT

ORDER DATE: August 19, 2014

ORDER TIME : 2:38 PM

ORDER NO. : 263110-010

CUSTOMER NO: 7807252

FOREIGN FILINGS

NAME: MACATE SYSTEMS CORPORATION

XXXX C	QUALIFICATION TO THE PROPERTY OF THE PROPERTY	ON (TYPE	: <u>C</u> (2)				1 AUI	<u></u>
PLEASE	RETURN THE	FOLLOWING	AS	PROOF	OF	FILING:		3 28	
XX	CERTIFIED PLAIN STAI CERTIFICAT	MPED COPY	STA	ANDING			FLORDA FLORDA	期 9 17	O

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Macate.	Systems	Corporation		
N	lame of corporation	on - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Forei "Certificate of Existence," or "Certi above referenced foreign corporation	ficate of Good Sta	anding" and check are sub		•
Please return all correspondence cor	_			
Latifa Shor	Ter			
Latifa Shor	Name of	Person		
The Group Suite 430 3401 SW 16	Glo bal	Managemen	Hilno.	
Suite 430	Firm/Con	npany		
3401 SW 16	o Ave, 1	Miramar, F	33027	
	Addr	ess		
	City/State a	and Zip code		
latifa. sho	rter@ th	egzm. con		
		for future annual report n	otification)	
For further information concerning the	his matter, please	call:		
Latifa Shorter Name of Person	at (371 5858	T _S S	
Name of Person	Area	Code & Daytime Telepho	one Number	+
STREET/COURIER ADDI New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	•	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	rporations	AUG 28 AN 9:17
Enclosed is a check for the following	amount:			
☐ \$70.00 Filing Fee ☐ \$78.75 F Certifica	Filing Fee & Cate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Stat	us &

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.

(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting b	ousiness in Florida)			
Delaware	3					
(State or countr	y under the law of which it is incorporated)	(FEI number, if appli	cable)			
12/02/2010	5	Perpetual				
(Date of incorporation) (Du		Duration: Year corp. will cease to ex	uration: Year corp. will cease to exist or "perpetual")			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150) 3401 SW 160 AVENUE, MIRAMAR,	2, F.S., to determine penalty liability)				
· · · · · · · · · · · · · · · · · · ·	(Principal office addres					
	3401 SW 160 AVENUE, MIRAMAR,	,				
	(Current mailing addres					
Name and stree	et address of Florida registered agent: (P.O. Corporation Service Company	Box <u>NOT</u> acceptable)	4 AUG 28 EGRETARY LLAHASSE			
ce Address:	1201 Hays Street		E PS			
	Tallahassee	32301 , Florida	9			
	(City)	(Zip code)	17			
ing been name gnated in this her agree to co es, and I am fi	ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes rela amiliar with and accept the obligations of n Corporation Service Company	nt as registered agent and agree ative to the proper and complete	to act in this capac			

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.

11. Names and business addresses of officers and/or directors:	Macare Ellandons. 14 AUG 28 AFGIPT			
A. DIRECTORS				
Chairman:	SECRETARY			
Address:	TALLAHASSEE, FLORIDA			
Vice Chairman:				
Address:				
Director: ALEXIA JONES				
Address: 3401 SW 160 AVE. SUITE 430				
MIRAMAR, R 33027				
Director: ALBERTO INTERIAN TIL	PAUL WIGODA			
Address: 3401 SW 160 AVE. SUITE 430	3401 SW 160 AVE			
MIRAMAR FL 33027	SUITE 430			
B. OFFICERS	MIRAHAR, & 3502			
President: S. Isaac Daniel				
Address: Suite 430, 3401 SW 160 Avenue				
Miramar, FL, 33027				
Vice President: HORTENCIA DANIEL				
Address: 3401 SW 160 Ave, SUITE 430				
MIRAMAR, FL 33027				
Secretary:				
Address:				
Treasurer:				
Address:				
NOTE: If necessary, you may arrach an addendum to the application listing additi	onal officers and/or directors			
12. James	5/14/ 5/11/45/5 4 /14/ 5/1 5/15/5/5/5/			
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.				
13. S. Isaac Daniel, President	·			
(Typed or printed name and capacity of person signing app	olication)			

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "MACATE SYSTEMS CORPORATION" IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF AUGUST,

A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MACATE SYSTEMS CORPORATION" WAS INCORPORATED ON THE SECOND DAY OF DECEMBER, A.D. 2010.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

TALLAHIASSEE FLORING

4906106 8300

141087437

AUTHENTY CATION: 1631937

DATE: 08-19-14

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