F15000004861

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/F110fie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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CORPORATE

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ACCESS, INC.

236 East 6th Avenue. Tallahassee, Florida 32303

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WALK IN

		PICK U	P: 11/3 Glinda					
		CERTIFIED COPY						
	хх	РНОТОСОРУ						
		CUS						
	хх	FILING	Foreign Articles					
1.		MOL CONSOLIDATION SERVICE (AMERICA) INC.						
		(CORPORATE NAME AND DOCUME	NT #)					
2.		(CORPORATE NAME AND DOCUME)	NT #)					
		(CORTORATE NAME AND DOCUME)	111 ")					
3.		(CORPORATE NAME AND DOCUME	NT #)					
4.								
7.		(CORPORATE NAME AND DOCUME	NT #)					
5.								
		(CORPORATE NAME AND DOCUME	NT #)					
6.		(CORPORATE NAME AND DOCUME	NT #)					
SPECIAL INSTRUCTIONS:								

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.

(orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
	If name unavails	able in Florida, enter alternate corporate name	adonted for the purpose of transacting by	usiness in Florida)
	Delaware		46-2472895	······································
2		3. y under the law of which it is incorporated)	(FEI number, if applic	able)
	March 14, 2013		,	
4	(Date	of incorporation)	(Date of duration, if other than	perpetual)
	upon filing	,		
6			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
, 2 [.]	727 Paces Ferry	Road, Building 2, Suite 1680, Atlanta, GA 30	339	
··—	<u></u>	(Princi	pal office address)	
_		(Current maili	ng address, if different)	
3. r	Name and <u>stree</u> Name:	t address of Florida registered agent: (P. NRAI Services, Inc.	O. Box <u>NOT acceptable</u>)	15 NOV SECRET
Offi	ce Address:	1200 South Pine Island Road	<u> </u>	SS de grant
		Plantation, FL 33324	, Florida	
		(City)	(Zip code)	SHA € 5
Hav desi lurt	ring been nam gnated in this her agree to co	ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes amiliar with and accept the obligations of NRAI Services, in	ment as registered agent and agree t relative to the proper and complete p of my position as registered agent.	o act in this capacity. I
			Michael D. McMani	

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:

A. DIR	ECTORS							
Chairman	Larry Wu							
Address:	Room 06-07, 24/F., Tower 1, Evergain Plaza, 880 Container Port Rd., Kwai Chung, N.T., HK			,				
Vice Cha	rman:							
Address:		. <u> </u>						
- Director:	Jeff Bumgardner							
Address:	2727 Paces Ferry Road, Building 2, Suite 1680, Atlanta, GA 30339							
Director:	Larry Wu	······						
	Room 06-07, 24/F., Tower 1, Evergain Plaza, 880 Container Port Rd., Kwai Chung, N.T., HK							
B. OFFI	CERS	- IA						
President:	Jeff Bumgardner		<u> 5</u>					
Address: _	2727 Paces Ferry Road, Building 2, Suite 1680, Atlanta, GA 30339	ETAR HASS	. + Ag	1.7.1				
•			<u>ယ</u>	1.4.440				
Vice Presi	dent:		_ ∞ _	-				
Address: .	·	- JRIE- - DA	<u> </u>	* one				
Secretary:				, <u>.</u>				
Address:								
	f necessary was may attach an addendum to the application listing additional officers an	d/or direc	tors.					
	Jeff Bumgardner B767CAB8A22449F Signature of Director or Officer							
The office are true as a third de	or or director signing this document (and who is listed in number 11 above) affirms that the or she is aware that false information submitted in a document to the Department of the Department							
13. Jeff E	(Typed or printed name and capacity of person signing application)							
	(Typed or printed name and canacity of narron cigning application)							

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MOL CONSOLIDATION SERVICE (AMERICA)

INC." 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 SECOND DAY OF

NOVEMBER, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MOL

CONSOLIDATION SERVICE (AMERICA) INC." WAS INCORPORATED ON THE

FOURTEENTH DAY OF MARCH, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE SR ω

4 8: 55 F STATE FLORIDA

5303005 8300

SR# 20150740415

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

Authentication: 10343829

Date: 11-02-15