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(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO:	Registration Sect Division of Corpo			
SUBJ	IECT: MPS INTE	RNATIONAL CORP.	ion - must include suffix	
		reame or corporat	ion - must menude surna	
Dear S	Sir or Madam:			
"Certi	ficate of Existence,		for Authorization to Transa Standing" and check are sub siness in Florida.	
Please	return all correspo	ndence concerning this ma	tter to the following:	
JOSE	E. MORALES			
		Name	of Person	
MDS I	NTERNATIONAL C	י∩סס		
MILO	NTERNA HONAL C		Company	
			•	
715 S	W 148 AVE #607	Α.	Idress	
SUNR	ISE, FL 33325	C:(C4		
		City/Stai	e and Zip code	
-IMOR	ALES@IDK.CC	E mail address: (to be us	ed for future annual report	notification
		E-man address. (to be us	ed for future annual report i	iourication)
For fu	rther information co	oncerning this matter, plea	se call:	
JOSE	E. MORALES	at (954) 774-0341	
	Name of Person	Area (Code Daytime Telep	hone Number
		IER ADDRESS:	MAILING A	
Registration Section Division of Corporations		_	Registration Section Division of Corporations	
	Clifton Building	DIALIONS	P.O. Box 632'	
	2661 Executive C		Tallahassee, F	L 32314
	Tallahassee, FL	32301		
Enclos	sed is a check for th	e following amount:		
# \$7	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy







December 11, 2015

JOSE E MORALES 715 SW 148 AVE #607 SUNRISE, FL 33325

SUBJECT: MPS INTERNATIONAL CORP

Ref. Number: W15000080087

We have received your document for MPS INTERNATIONAL CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The registered agent must sign accepting the designation.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 115A00026035



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.

(Enter n	ATTERNATIONAL CORP. ame of corporation; must include "INCORPORATE Co.," "Corp.," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	
	TERNATIONAL CORP. unavailable in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)	
2. SAN II	IAN PR	3.	66 0701369	
(State or country under the law of which it is incorporated)		1	(FEI number, if applicable)	
4. CEDTE	MDED 17 2007	5		
(Date of incorporation)		٠.	(Date of duration, if other than perpetual)	
6.				
7. <u>4182 SO</u>	LITH LINIVERSITY DRIVE DAVIE FL. 33328 (Pri	ncij	pal office address)	
	(Current ma	ailiı	ng address, if different)	
8. Name a	and street address of Florida registered agent: ((P.C	O. Box NOT acceptable)	
N	ame: <u>IOSE F_MORALES</u>		WALL	ine a
Office Ad	dress: 715.SW 148.AVE #607			* * .
			, Florida <u>33325</u> 👙 🔆	
	(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.

11. Nan	nes and business addresses of officers and/or directors:	
A. DIR	ECTORS	
Chairmar	JORGE A. MELENDEZ ::	
Address:	CALLE CALAF 400 PMB SAN JUAN, PR 00918	
Vice Cha	irman:	
Address:	715 SW 148 AVE. #607, SUNRISE, FL 33325	
Director:	KELVIN J. MORALES	
	8 CLARK ST HURLPURT FIELD, FL	
Address:		
B. OFF	ICERS	
President	JORGE A. MELENDEZ	
Address:	CALLE CALAF 400 PMB 85 SAN JUAN, PR 00918	DESCRIPTION SHAREST
Vice Pres	JOSE E. MORALES	TO TO STATE OF THE PARTY.
Address:	715 SW 148 AVE #607 SUNRISE, FL 33325	50 6 50 5
Secretary	;	7
Address:		
Treasurer	OMY M. MORALES	
	PO BOX 1304 OROCOVIS, PR 00720	
	If necessary, you may attach an addendum to the application listing additional off	icers and/or directors.
12.	Signature of Director or Officer	
are true a a third d	signature of Director of Officer cor of Gracer or director signing this document (and who is listed in number 11 above) affirm and that he or she is aware that false information submitted in a document to the D egree felony as provided for in s.817.155, F.S. IGE A. MELENDEZ	ns that the facts stated herein

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



Commonwealth of Puerto Rico DEPARTMENT OF STATE San Juan, Puerto Rico

CERTIFICATE OF GOOD STANDING

I, VÍCTOR A. SUÁREZ MELÉNDEZ, Secretary of State of the Commonwealth of Puerto Rico,

CERTIFY: That, **MPS INTERNATIONAL CORP.**, register number **175453**, a **for profit domestic** corporation, organized under the laws of Puerto Rico on **September 17, 2007**, has complied with the filing of its Annual Reports.



IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Commonwealth of Puerto Rico, in the City of San Juan, Puerto Rico, today, December 23, 2015.

VÍCTOR A. SUÁREZ MELÉNDEZ Secretary of State

To validate this certificate go to:

http://estado.pr.gov/

This certificate can be validated an unlimited number of times before its expiration date of 22-Dec-2016.

Certificate Validation Number: 141694-60736304