Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000114748 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Please retain original filing date of submission 5/09

From:

Account Name

: C T CORPORATION

Account Number: FCA00000023 : (850)205-8842 Phone

: (850)878-5368 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

Molymet Corporation

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

Electronic Filing Menu

Corporate Filing Menu

Helpay 2 0 2016

Y SULKER

5/9/2016

44

5/19/2016 8:58:59 AM From: To: 8506176383(2/6)

850-617-6381

5/12/2016 9:38:01 AM PAGE

1/001 Fax Server

, į



May 12, 2016

FLORIDA DEPARTMENT OF STATE **Division of Corporations**

CT CORPORATION

SUBJECT: MOLYMET CORPORATION

REF: W16000034939

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 document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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 calī (850) 245-6051.

Shelia H Young Regulatory Specialist II

FAX Aud. #: H16000114748 Letter Number: 516A00010002

MIGHAY 19

COVER LETTER,

TO: Registration Section Division of Corpor		•	
MOLVMET	CORPORATION		•
SUBJECT: MODITION	Name of corporation	- must include suffix	
Dear Sir or Madam:			
"Certificate of Existence,"	by Foreign Corporation for or "Certificate of Good Stan orporation to transact busine	ding" and check are sub	ct Business in Florida," mitted to register the
Please return all correspon	dence concerning this matter	to the following:	
AILEEN COLLENDER			
	Name of I	Person	
MILES & STOCKBRIDGE	P.C.		
	Firm/Com	pany	
100 LIGHT STREET			
	Addre	?\$\$	
BALTIMORE, MARYLANI			
mallogi@mllassessidesides	City/State ar	nd Zip code	
acollend@milesstockbridge.c	E-muil address: (to be used f	or future annual report	notification)
	ncerning this matter, please c	•	
AILEEN COLLENDER	at (410	385-3654	
Name of Person	Area Code	e Daytime Telep	hone Number
STREET/COURING Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 3	on rations enter Circle	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
Enclosed is a check for the	following amount:		
☑ \$70.00 Filing Fee □	378.75 Filing Fee & Certificate of Status	1.\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

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 na	ame adopte	I for the purpose of transacting business in I	lorida)		
OFLAWARE	•	·	•			
2. (State or countr	ry under the law of which it is incorporated	_ 3 }	(FEI number, if applicable)			
4 6/7/2000						
(Date	of incorporation)		(Date of duration, if other than perpetual	1)		
6 UPON ACCEPT	TANCE OF REGISTRATION					
	(Date first transacted busine (SEE SECTIONS 607.150) & 60		a, if prior to registration) S., to determine penalty liability)			
7 9130 S. Dudéland	d Boulevard, #1623, Miami, Florida 33156	ı				
	(Pr	incipal offic	ce address)			

	(Current in	railing addr	ess, if different).	ت ب	5	
0 N	dd eCitarida unuintunad agants	(BA Bau	MOST generated a	$\pm c$	V- same
8. Name and stre	et address of Florida registered agent:	(P.O. Box	MOT acceptable)	35		175 mag a
Name:	C T Corporation System			ب''رینا پرستان	ω,	
O/12 A	1200 South Pine Island Road			77	Ħ	117
Office Address:	Plantation, FL 35324		m. N.	20 A	=	
Office Address:	· · · · · · · · ·		Florida	5	70	
Office Address:	(City)		(Zip code)	•		
	Plantation, Fl. 33324 (City) ent's acceptances			2.	•	

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.

5/19/2016 8:58:59 AM From: To: 8506176383(5/6)

11. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman: Arturo Verderau, CEO / Director		
9130 S. Dadeland Boulevard, #1623, Miami, Florida 33156		
Vice Chairman:		
Address: Camino Nos a Los Morros 66, San Bernardo Springs, Santiago, Chile		
Director:		
Address: 1 Milkhouse Gate, Guilford, Surrey, UK GU1 3EZ		
700000		
Mauricio Fernandez		
Camino Nos a Los Morros 66, San Bernardo Springs, Santiago, Chile		
Director: Diego Murtin - 9130 S. Dadeland Boulevard, #1623, Mismi, Florida 33156		
B. OFFICERS		
President:		
Cumino Nos a Los Morros 66, San Bernardo Springs, Santiago, Chile		
	F.	
Vice President:	5 3	
Address: 1 Milkhouse Gate, Guilford, Surrey, UK GUI 3EZ	## (A. 1974)	•
Addition	SES	ۇ. سىھود د
Secretary:	- F	·
Camino Nos e Los Morros 66, San Bernardo Springs, Santingo, Chile	50 × 1	<u></u>
Treasurer: Diego Martin	SA R	بتمع
9) 30 S. Dadeland Boulevard, #1623, Miaml, Florida 33156		
NOTE: If necessary, you may attach an addendum to the application listing additional office	ers and/or directors	
	tion of discours.	
12. Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 11 above) affirms are true and that he or she is aware that false information submitted in a document to the De a third degree felony as provided for in s.817.155, F.S.	s that the facts stated herein partment of State constitutes	
13. Arturo Verderau, CEO / Director		
(Typed or printed name and capacity of person signing application)		

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MOLYMET 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 NINTH DAY OF MAY, A.D. 2016.

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

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

3235285 8300 SR# 20162951093

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

Settray W. Bullack. Secretary of Stole

Authentication: 202280292

Date: 05-09-16