(Re	equestor's Name)	
(Ac	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	N	
ا پ	$2^{2^{2^{2^{2^{2^{2^{2^{2^{2^{2^{2^{2^{2$	
DIL Y	~ \	

Office Use Only



100286034201

06/08/16--01004--027 **70.00

2016 AUG -5 A IO: 03

Stor 8 9 JUA

>

0



2016 AUG -5 PH 3: 47

FLORIDA DEPARTMENT OF STATE Division of Corporations SAUGARDANA CONTROL OF THE PROPERTY OF STATE DIVISION OF CORPORATION OF STATE DIVISION OF

June 9, 2016

DANILO JIMENEZ 555 NE 15TH ST, STE 23A MIAMI, FL 33132

SUBJECT: LIAL, CORP.

Ref. Number: W16000042325

We have received your document for LIAL, CORP. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 716A00012190



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2016

DANILO JIMENEZ 555 NE 15TH ST, STE 23A MIAMI, FL 33132

SUBJECT: LIAL, CORP

Ref. Number: W16000035997

We have received your document for LIAL, CORP, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$70.00.

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.

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, p $\frac{1}{100}$ is equal (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 616A00 ជីពីទី10

under the law of which it is incorporated.

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.
LIAL, CORP.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
LIAL, CORPORATION or LIAL DELAWARE, CORPORATION OF LIAL DELAWARE,
2. De la usare (State or country under the law of which it is incorporated) (FEI number, if applicable)
(State of country under the law of which it is incorporated) (FEI number, if applicable)
4. (Date of inforporation) (Date of duration, if other than perpetual)
(Substitution, 11 onto I mail perpetual)
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine nenalty liability)
7. S55 NE 15 "STREET, Svite 23A, MAM FL33132 (Principal office address)"
SAMENS Above 30 8
(Current mailing address, if different)
Name: <u>leality Check Legal</u> Solutions UC
Office Address: 555 NE 15 A ST SOIL 25 A
Name: Leality Check Legal Solutions U.C. Office Address: 555 NEIST Scile 234 (City) (City) Name: Address: (P.O. Box NOT acceptable) Control of the con
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

airman:		·····				
dress:						
e Chairman:						
dress:						
				<u> </u>		
ector:			<u></u>			
tress:					· ·	
	, , ,	-7 1			_	-,-,-
ector: Danilo Jinenez, Realiress: 555 NE ISH ST MAMM' PL 33	1, ty C	hack 1	Mana	zent	_ <u>></u> 2	stotizi
iress: 555 NE ISH ST	- ^ 	Suite	<u>237</u>	1		
MANN FL 33						
OFFICERS						
ident:		•				
ress:						
	·					
President: LISA JORSE!	INa	Nem	<u>a</u>			
ress:	_	/ I	SUI	te.		
MIAMI EL	33:			5	- - No	
etary:		1			. es:	77.1
ress:		•		Const.	- 3a	Marin comme
surer:			,		5	
ress:		i /		74	<u> </u>	
TE: If necessary, you may attach an addendum to the	ο Ωlication	listingadditio	nal officer	and/br	d d d d d d	
\ 1 \ \/\.	S application	Visiting addition	niai officer:	s grij ravor	Tifactor	5.
Signature of I						
	listed in nur	nber II above) affirms th	at the fa	cts state	ed herein onstitutes

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "LIAL, CORP." 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 TWENTY-SIXTH DAY OF JULY, A.D. 2016.

A STATE OF THE STA

Authentication: 202719917

Date: 07-26-16

5647753 8300 SR# 20164752198