## F19000002109

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  * Mr. Rodriguee requested  that & odd "," after  culture and the "" after  Inc.

Office Use Only



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B KINSEY



April 25, 2019

ANDRES RODRIGUEZ 150 SE 2ND AVENUE, STE 404 MIAMI, FL 33131

SUBJECT: VIA GLOBAL VENTURES INC

Ref. Number: W19000040634

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

The name and title of the person signing the document must be noted beneath or opposite the signature.

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) 245-6052.

Brooke N Kinsey Regulatory Specialist II

Letter Number: 919A00008347

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## **COVER LETTER**

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TO: Registration Division of	Section Corporations			
	SLOBAL VENTURES INC			
	Name of corpo	oration - mus	t include suffix	
Dear Sir or Madam:				
Certificate of Existe	cation by Foreign Corporation ence," or "Certificate of Goo eign corporation to transact t	d Standing"	and check are e	sact Business in Florida," ubmitted to register the
Please return all corre	espondence concerning this r Z	matter to the	following:	
R&P ACCOUNTING		ne of Person		
- CCOONTING				
150 SE 2ND AVE SUF		/Company		
MIAMI, FL 33131	,	Address		
AROD8723@GMAIL.0		ate and Zip	code	
	E-mail address: (to be u	sed for futu	e annual report	notification)
For further informatio	n concerning this matter, ple	ase call:		
ANDRES RODRIGUEZ	305 at (	358-	1310	
Name of Person		<del></del> /	Daytime Telep	phone Number
Registration Se Division of Co Clifton Buildir	rporations g c Center Circle		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, f	Section orporations 7
Enclosed is a check for	the following amount:			
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		Filing Fee & cd Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

## 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. VIA GLOBAL VENTURES INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  DELAWARE  3.  (State or country under the law of which it is incorporated)  (Bate of country under the law of which it is incorporated)  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  951 NW 7TH AVE #600  (Principal office address)  (Current mailing address, if different)  Vame and street address of Florida registered agent: (P.O. Box NOT acceptable)  R&P ACCOUNTING AND TAXES INC  150 SE 2ND AVE SUITE 404  (City)  (City)  (Cip code)  (Cip code)	able)
(State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (Date of incorporation)  (Date of incorporation)  (Date of duration, if other than perpetual)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  R&P ACCOUNTING AND TAXES INC  150 SE 2ND AVE SUITE 404  (City)  Florida  (City)  (Zip code)	able) s perpetual)
(Date of incorporation) (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  MIAMI, FL 33136  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  R&P ACCOUNTING AND TAXES INC  150 SE 2ND AVE SUITE 404  (City)  (City)  (City)  (City)  (Date of duration, if other than perpetual)  (Pate of duration, if other than perpetual)  (Pate of duration, if other than perpetual)  (Sate of duration, if other than perpetual)  (Pate of duration, if other than perpetual)	n perpetual)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  951 NW 7TH AVE #600  (Principal office address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  R&P ACCOUNTING AND TAXES INC  150 SE 2ND AVE SUITE 404  (City)  (City)  (City)  (Zip code)  Registered agent's acceptance:	r perpetual)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  951 NW 7TH AVE #600  (Principal office address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  R&P ACCOUNTING AND TAXES INC  150 SE 2ND AVE SUITE 404  (City)  (City)  (Zip code)  Registered agent's acceptance:	
(Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  R&P ACCOUNTING AND TAXES INC  R&P ACCOUNTING AND TAXES INC  150 SE 2ND AVE SUITE 404  MIAMI  (City)  (City)  (Zip code)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  R&P ACCOUNTING AND TAXES INC  150 SE 2ND AVE SUITE 404  CC Address:  MIAMI  (City)  (City)  Registered agent's acceptance:	
Ce Address:    MIAMI	<del></del>
Ce Address:    MIAMI	9 <b>1</b>
Ce Address:    MIAMI	7 <u>25</u> 127 128
(City) (Zip code)	
(City) (Zip code) +:	<u> </u>
egistered agent's acceptance:	
	act in this capacit rformance of my
enated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit for agree to comply with the provisions of all statutes relative to the proper and complete performance of my s, and I am familiar with and accept the obligations of my position as registered agent.	
ing been named as registered agent and to accent service of process for the above stand	

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:

1951 NW 7TH AVE #600		<del></del>
MIAMI, Ft. 33131		
Vice Chairman		<del></del>
1951 NW 7TH AVE #600		
MIAMI, FL 33131		
Director:		
Address:		
Director:		
Address:		— <u>-</u>
B. OFFICERS		
President:		
Address:		-
		27
Vice President:		· · ·
Address:	<del>-</del>	·
	هنب	·
Secretary:		
Address:		·
Treasurer:		<del></del>
Address:	·	<del></del>
NOTE: If necessary, you may attach an addendum to the applic	ration listing additional officers and/or directors.	
Significant of Objection	r or Officer	
The officer or director signing this document (and who is listed are true and that he or she is aware that false information submit	n number 11 above) affirms that the facts stated he	rein
a third degree felony as provided for in s.\$17.155, F.S.	ted in a document to the Department of State Const	nuies



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

DELAWARE, DO HEREBY CERTIFY "VIA GLOBAL VENTURES, 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 EIGHTH DAY OF APRIL, A.D. 2019.

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

6458206 8300 SR# 20192607450

Authentication: 202595183

Date: 04-08-19