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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20080000045 Phone : (302)645-7400 Fax Number : (302)645-1280

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Email Address: ana@choilawfirm.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Chegando Mickey Corporation

Certificate of Status	<u>i</u>
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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.

(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 925 Brickell Avenue Ste D205 Miami Florida 33129 (Principal office address) (Current mailing address, it different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
(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) 1925 Brickell Avenue Ste D205 Miami Florida 33129 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
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Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	<u></u>
	[2013 K]
Name:	$\bar{\omega}$
fice Address:	- ;
Miami , Florida 33129 (City) (Zip code)	ن ن
(City) (Zip code)	යා

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.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Ana Paola Amaral-Choi	
392 NE 87 St. El Portal, Florida 33138	
B. OFFICERS	
President:	
Address:	
Vice President:	(2) (4)
Address:	•
Secretary:	3
Address:	(^)
Treasurer:	(D)
Address:	
NOTE: If necessary, you may attach an addendum to the application lis	ting additional officers and/or directors
12. Signature of Director or Office	cer
The officer or director signing this document (and who is listed in number are true and that he or she is aware that false information submitted in a a third degree felony as provided for in s.817.155, F.S.	er 11 above) affirms that the facts stated herein
13. Ana Paela Amaral-Choi, Director	

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

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHEGANDO MICKEY 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 THIRTEENTH DAY OF NOVEMBER, A.D. 2019.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHEGANDO MICKEY CORPORATION" WAS INCORPORATED ON THE TWENTY-THIRD DAY OF JULY, A.D. 2018.

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

6985203 8300 SR# 20198C63831

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

Authentication: 203996873

Date: 11-13-19