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COVER LETTER

	ion Section of Corporations			
SUBJECT: M	FCXY, Inc.			
	Nam	ne of corporation	- must include suffix	
Dear Sir or Mada	:m:			
"Certificate of Ex		ate of Good Star	Authorization to Transac ading" and check are subress in Florida.	
Please return all	correspondence conce	rning this matte	to the following:	
Lawrence G. Walt	ers, Esq.			
		Name of	Person	
Walters Law Grou	p			
		Firm/Con	npany	
195 W. Pine Aven	ue			
		Addr	ess	
Longwood, FL 32	750			
		City/State a	nd Zip code	
paralegal@firstam				
	E-mail addr	ess: (to be used	for future annual report no	otification)
For further infon	nation concerning this	s matter, please	call:	
Lawrence G. Walt	ers, Esq.	at (975-9150	
Name of	Person	Area Cod		one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration So Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
		DEPARTMENT	TOF STATE S78.75 Filing Fee & Certified 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.

If name unavaila	ble in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in Florida)
Illinois		20-8682714
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)
3/14/2007	5	Perpetual
(Date	of incorporation)	(Date of duration, if other than perpetual)
N/A		
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)
2700 Patriot Blvd	. #250, Glenview, IL 60026	
	(Principal of	fice street address)
	(Current mail	ing address, if different)
Name and stree	(Current mails t address of Florida registered agent: (P. Lawrence G. Walters, Esq.	
Name:	t address of Florida registered agent: (P.	
Name:	t address of Florida registered agent: (P. Lawrence G. Walters, Esq.	O. Box <u>NOT</u> acceptable)
	t address of Florida registered agent: (P. Lawrence G. Walters, Esq. 195 W. Pine Avenue	O. Box <u>NOT</u> acceptable)

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.

A. DIRECTORS Leonid Radvinsky Name: ______ Name: ☐ Chairman □ Chairman 2123 Warwick Lane □Vice Chairman Address: □Vice Chairman Address: Glenview, IL 60026 ☐ Director Director President □ President ☐ Vice President ☐ Vice President ☐Treasurer ☐ Secretary □ Secretary ☐ Treasurer □Other _____ □Other _____ □Other _____ ☐ Other _____ Name: _____ Name: _____ □ Chairman Chairman □ Vice Chairman Address: ______ □ Vice Chairman Address: ______ Director □ Director President □President □ Vice President □Vice President □ Secretary □Treasurer ☐ Secretary □Treasurer Other _____ □Other □Other _____ □ Chairman Name: _____ □ Chairman Name: _____ □ Vice Chairman Address: ☐ Vice Chairman Address: _____ □ Director □ Director □ President □ President □ Vice President __ □Vice President ☐ Secretary □Treasurer ☐ Secretary □ Treasurer □Other ______ □Other _____ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Leonid Radvinsky, President

File Number

6538-282-2



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

MFCXY, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 14, 2007, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE. IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 30TH 2020 .

day of IULY A.D.

Authentication #: 2021202566 verifiable until 07/30/2021 Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE