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ZOZI JAN 19 PH 3: 06
SECRETARY OF STATE

Marai



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2021

DEANNA DIBIN 3011 ARMORY DR. STE 190 NASHVILLE, TN 37204

SUBJECT: MNM GLOBAL, INC. Ref. Number: W21000002167

We have received your document for MNM GLOBAL, 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):

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.

Letter Number: 121A00000472

Yvette Scott Document Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Division of C			
SUBJECT: MNM	Global, Inc.		
30b3EC1	Name of corporation	on - must include suffix	
Dear Sir or Madam:			
"Certificate of Existe	cation by Foreign Corporation for ence," or "Certificate of Good Str eign corporation to transact busing	or Authorization to Transact Business anding" and check are submitted to reness in Florida.	in Florida," egister the
Please return all corr	espondence concerning this matt	ter to the following:	
Deanna Dibin, CPA			
	Name o	of Person	
Carr, Riggs and Ingrar	n, LLC		Z021 JAN 19 SECRETAR TALL/HI
	Firm/Co	ompany	FR S
3011 Armory Dr. Ste	190		7110
	Ade	dress	(a) \ \
Nashville, TN 37204			PH 3
	City/State	e and Zip code	72 0
ddibin@cricpa.com			m о
	E-mail address: (to be use	d for future annual report notification	1)
For further informati	ion concerning this matter, please	e call:	
Deanna Dibin, CPA	615 at (760-1542	•
Name of Pe		ode Daytime Telephone Num	ber
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee. FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	for the following amount: yable to: FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87. Certified Copy Cer	.50 Filing Fee. tificate 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 unavails	ble in Florida, enter alternate corporate name a	donted for the purpose of transacting by	isiness in Florida)
ar			
(State or country	3. vunder the law of which it is incorporated)	83-1489229 (FEI number, if applicable)	
(Date	5. (Date of duration, if other than perpetual)		
01/01/2020			. <u>.</u>
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 221 Village Ct, #221 Davenport, FL 33896 (Principal office street address) (Current mailing address, if different)		2021 JAN 19 PM SECRETARY OF TALL ARASSE	
Name and stree	et address of Florida registered agent: (P.O Nassyrulla Malayev	. Box <u>NOT</u> acceptable)	PH 3: 06 OF STATE ESEE, FL
ffice Address:	221 Village Ct. #221		
mice Address.	Davenport	, Florida <u>33896</u>	
	(City)	(Zip code)	

(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 under the law of which it is incorporated.

A. DIRECTORS						
□Chairman	Name: Nassyrulla Malayev	□Chairman	Name:			
□Vice Chairman	Address: 221 Village Ct. #221	□Vice Chairman	Address:			
□Director	Davenport, FL 33896	□Director	. 			
■President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	□ Secretary		□Treasurer		
🗀 Other	Other	□Other		□()ther		
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:	2021 J SEC:17A1		
□Director		Director		量量工		
□President		□President		- 		
□Vice President		□Vice President		11 - 1 - (-1-1-1)		
☐ Secretary	□Treasurer	☐ Secretary		Services 3: 06		
□Other	Other	□Other		Other		
□Chairman	Name:	□Chairman	Name:			
	Address:					
	Addices.	Director				
Director		□President				
□ President		□Vice President				
				GT		
☐ Secretary	□Treasurer 	☐ Secretary		☐Treasurer		
□Other	□ Other	□Other		□Other		
individuals may b	Use an attachment to report more than six (6). The attended to the index when filing your Portida Departm	jent of State Annual I	ed for reporting p Report form.	urposes only, Non-indexed		
12.	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 \$817.155. E.S.						
13	Massirula Malaile (Typed or printed name and capacity of per	U Presidence son signing application	Next_			



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

NASSYRULLA MALAYEV

109

5353 CANE RIDGE RD. ANTIOCH, TN 37013

Request Type: Certificate of Existence/Authorization

Request #:

0392255

Issuance Date: 12/03/2020

Copies Requested:

December 3, 2020

Document Receipt

Receipt #: 005915076

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3794107242

\$20.00

Regarding:

MNM GLOBAL INC

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 08/07/2018

Status:

Active

Duration Term:

Perpetual

Business County: DAVIDSON COUNTY

Control #:

978447

08/07/2018

Formation Locale: :TENNESS

Inactive Date:

Date Formed:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective the issuance date noted above



- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett

Secretary of State

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