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## **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJE	ECT: MikeDP Ventures LLC	1		
3000		of corporation - mu	st include suffix	
Dear Si	r or Madam:			
"Certifi	closed "Application by Foreign C cate of Existence," or "Certificat eferenced foreign corporation to	te of Good Standing"	and check are submi	Business in Florida," tted to register the
Please	return all correspondence concert	ning this matter to th	e following:	
Micha	el De Paola			
		Name of Perso	n	•
MikeD	P Ventures LLC 1			
		Firm/Company		
111 W	110th St PHB			
		Address		
New Y	ork, New York 10026			
		City/State and Zi	p code	
Mary(	@tw-fineart.com	(4.1)		(Funtion)
	E-mail addre	ss: (to be used for fu	ture annual report not	meanon)
For fur	ther information concerning this	matter, please call:		
	Mary Smoot	at ( 908)	295-5971	
•	Name of Person	Area Code	Daytime Telepho	ne Number
	STREET/COURIER ADDRE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations
Please r	ed is a check for the following ar nake check payable to: FLORIDA 1 .00 Filing Fee	DEPARTMENT OF Sing Fee &		☐ \$87.50 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.

	orporation; must include "INCO orp," "Inc," "Co," or "Corp.")	M OM TED,	,, 00	,	
(If name unavaila	able in Florida, enter alternate co	rporate name adopte	d for the purpose of transact	ing business in Florida)	
NY	3. <u>16-1653192</u>				
•	(FEI number, if applicable)			applicable)	
9.	15/2002	5.			
	of incorporation)		(Date of duration, if other	r than perpetual)	
			<u> </u>		
-			da, if prior to registration) S., to determine penalty liab	ility)	
Address in Fl	orida: 1101 SE Ranch Rd, J	lupiter FL 33468			
Mailing addro	ess: 111 W 110th St, PH B, N	ew York, NY 100	26		
Mailing addro	ess: 111 W 110th St, PH B, N				
Mailing addro		ew York, NY 100 Current mailing addr			
-		Current mailing addr	ress, if different)	_ ــــــــــــــــــــــــــــــــــــ	
Name and street	et address of Florida registered	Current mailing addr	ress, if different)	21 112 113	
-	et address of Florida registered Registered Agents Inc	Current mailing addr	ress, if different)	21 Jun	
Name and street Name:	et address of Florida registered	Current mailing addr	ress, if different)	Z1 JUN 11	
Name and street Name:	et address of Florida registered Registered Agents Inc 7901 4th St N, Suite 3	Current mailing addr d agent: (P.O. Box	ress, if different)  NOT acceptable)	21 JUNIT P	
Name and street	et address of Florida registered Registered Agents Inc 7901 4th St N, Suite 3	Current mailing addr d agent: (P.O. Box	ress, if different)	1 25 C	
Name and <u>stree</u> Name: Tice Address:	Registered Agents Inc 7901 4th St N, Suite 3 St Petersburg (City)	Current mailing addr d agent: (P.O. Box	ress, if different)  NOT acceptable)	1 25 C	
Name and street Name: Tice Address:  Registered againg been name	Registered Agents Inc  7901 4th St N, Suite 3th St Petersburg  (City)  ent's acceptance:  led as registered agent and to	Current mailing addr d agent: (P.O. Box	ress, if different)  NOT acceptable)  Florida 33702 (Zip code)	## P	
Name and street Name: Tice Address:  Registered agaiving been namesignated in this	Registered Agents Inc  7901 4th St N, Suite 3  St Petersburg  (City)  ent's acceptance:  led as registered agent and to application, I hereby accept	Current mailing addr d agent: (P.O. Box  00  accept service of p the appointment a	ress, if different)  NOT acceptable)  Florida 33702 (Zip code)  process for the above states registered agent and ag	ted corporation at the play	
Name and street Name: Tice Address:  Registered agaving been names signated in this rther agree to comment of the street agreet	Registered Agents Inc  7901 4th St N, Suite 3  St Petersburg  (City)  ent's acceptance:  led as registered agent and to application, I hereby accept tomply with the provisions of	Current mailing addr d agent: (P.O. Box  o accept service of the appointment a fall statutes relative	ress, if different)  NOT acceptable)  Florida 33702 (Zip code)  process for the above states registered agent and agent to the proper and compare to	ted corporation at the play	
Name and street Name: Tice Address:  Registered agaving been names ignated in this rther agree to contact the street agreement the stre	Registered Agents Inc  7901 4th St N, Suite 3  St Petersburg  (City)  ent's acceptance:  led as registered agent and to application, I hereby accept	Current mailing addr d agent: (P.O. Box  o accept service of the appointment a fall statutes relative	ress, if different)  NOT acceptable)  Florida 33702 (Zip code)  process for the above states registered agent and agent to the proper and compare to	ted corporation at the play	
Name and street Name: Tice Address:  Registered agaving been names signated in this rether agree to contact the street agreement	Registered Agents Inc  7901 4th St N, Suite 3  St Petersburg  (City)  ent's acceptance:  led as registered agent and to application, I hereby accept tomply with the provisions of	Current mailing addr d agent: (P.O. Box  o accept service of the appointment a fall statutes relative	ress, if different)  NOT acceptable)  Florida 33702 (Zip code)  process for the above states registered agent and agent to the proper and compare to	ted corporation at the play	

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: Michael De Paola	□Chairman	Name:					
□Vice Chairman	Address:111 W 110th St, PH B NY, NY 10026	□Vice Chairman	Address:					
□Director		Director						
☑President		□President						
□Vice President		□Vice President						
Secretary	□Treasurer	☐ Secretary	Treasurer					
□Other	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					
□ 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	□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								

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.

## State of New York Department of State } ss:

I hereby certify, that MIKE DP VENTURES LLC I a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 09/05/2002, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment MIKE DP VENTURES LLC I, changing its name to MIKEDP VENTURES LLC I, was filed 09/24/2002.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 25th day of May two thousand and twenty-one.

Brandon C Higher

Brendan C Hughes

Executive Deputy Secretary of State