Fa1000006a41

(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:					

Office Use Only



300375560053

10/27/21--01011--011 *+70.00



T. LEMIEUX OCT 29 2021

COVER LETTER

TO:	Registration Section Division of Corporations			
SIRI	ECT: MHP INVESTMENTS	& CONSULTING,	INC.	
ЭОВ		ame of corporation	n - must include suffix	
Dear S	ir or Madam:			
"Certi:		icate of Good Star	· Authorization to Transact Business in Flor nding" and check are submitted to register t ess in Florida.	
Please	return all correspondence con	cerning this matte	r to the following:	
MICH	AEL HOFFMAN			
		Name of	Person	
MHP I	NVESTMENTS & CONSULTI	NG, INC.		
		Firm/Con	npany	
1212 P	ONCE DE LEON DRIVE			
		Addr	ress	
FORT	LAUDERDALE, FL 33316			
-		City/State a	and Zip code	
Michae	el@muellerhoffman.com	·	•	
	E-mail ad	dress: (to be used	for future annual report notification)	
For fu	ther information concerning t	his matter, please o	call:	
Michael Hoffman		at (303	506-1293	
	Name of Person	Area Cod	le Daytime Telephone Number	•
	STREET/COURIER ADD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Please		DA DEPARTMENT	T OF STATE ☐ \$78.75 Filing Fee & ☐ \$87.50 Filin Certified Copy Certificate of Certified Co	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 unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transac	cting business in Florida)	
COLORADO	3	46-2647160		
(State or country	y under the law of which it is incorporated)	(FEI number, if	applicable)	
5/1/2013	5			
(Date of incorporation)		(Date of duration, if oth	(Date of duration, if other than perpetual)	
1/4/2021				
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty lial	bility)	
1212 PONCE DE	LEON DRIVE, FORT LAUDERDALE FL	33316		
	(Principal of	ice street address)		
	(Current maili	ng address, if different)		
	(Current maili	ng address, if different)		
Name and stree	(Current maili et address of Florida registered agent: (P.		21	
	·		21 6	
Name:	et address of Florida registered agent: (P. MICHAEL HOFFMAN		21 001	
Name:	et address of Florida registered agent: (P.0 MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE	O. Box <u>NOT</u> acceptable)	21 00127	
Name:	et address of Florida registered agent: (P. MICHAEL HOFFMAN	O. Box <u>NOT</u> acceptable) , Florida 33316	21 OCT 27 #	
Name:	et address of Florida registered agent: (P.0 MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE		21 OUT 27 #1 6	
Name: fice Address:	et address of Florida registered agent: (P.O. MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE FORT LAUDERDALE FL (City)	O. Box <u>NOT</u> acceptable) , Florida 33316	21 001 27 MI 6-50	
Name: fice Address: Registered age	et address of Florida registered agent: (P.O. MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE FORT LAUDERDALE FL (City) ent's acceptance:	O. Box NOT acceptable) , Florida 33316 (Zip code)	21 OCT 27 #1 6 54 of the potential of th	
Name: fice Address: Registered againsing been namesignated in this	et address of Florida registered agent: (P.O. MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE FORT LAUDERDALE FL (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint	O. Box NOT acceptable) , Florida 33316 (Zip code) ice of process for the above sta	ted corporation at the p gree to act in this capac	
Name: fice Address: Registered agoving been namesignated in this ther agree to contact the contact that the the	et address of Florida registered agent: (P.O. MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE FORT LAUDERDALE FL (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoints omply with the provisions of all statutes is	O. Box NOT acceptable) , Florida 33316, Florida (Zip code) ice of process for the above stament as registered agent and appelative to the proper and comp	ted corporation at the p gree to act in this capac	
Name: fice Address: Registered agoving been namesignated in this ther agree to contact the contact that the contact the contact that the contact the contact that the contact the contact the contact that the contact the contact the contact that the contact th	et address of Florida registered agent: (P.O. MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE FORT LAUDERDALE FL (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint	O. Box NOT acceptable) , Florida 33316, Florida (Zip code) ice of process for the above stament as registered agent and appelative to the proper and comp	ted corporation at the p gree to act in this capac	
Name: ffice Address: Registered againg been namesignated in this rther agree to contact the second contact	et address of Florida registered agent: (P.O. MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE FORT LAUDERDALE FL (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoints omply with the provisions of all statutes is	O. Box NOT acceptable) , Florida 33316, Florida (Zip code) ice of process for the above stament as registered agent and appelative to the proper and comp	ted corporation at the p gree to act in this capac	
Name: fice Address: Registered ago aving been nam signated in this rther agree to co	et address of Florida registered agent: (P.O. MICHAEL HOFFMAN 1212 PONCE DE LEON DRIVE FORT LAUDERDALE FL (City) ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoints omply with the provisions of all statutes is	O. Box NOT acceptable) , Florida 33316, Florida (Zip code) ice of process for the above stament as registered agent and appelative to the proper and comp	ted corporation at the p gree to act in this capac	

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 MICHAEL HOFFMAN Name: ☐ Chairman □ Chairman Name: 1212 PONCE DE LEON DRIVE □ Viœ Chairman Address: ☐ Vice Chairman Address: FORT LAUDERDALE, FL 33316 □Director Director □ President President ☐ Vice President □Vice President □ Secretary ☐ Treasurer □ Secretary ☐ Treasurer □Other _____ Other _____ ☐Other _____ Other _____ Name: _____ □ Chairman □ Chairman Name: Address: □Vice Chairman Address: ☐ Vice Chairman □Director Director ☐ President President □Vice President □Vice President ☐ Secretary ☐Treasurer □ Secretary □ Treasurer ☐Other _____ Other ____ □Other _____ □Other _____ ☐ Chairman Name: Chairman Name: □ Vice Chairman Address: _____ Address: ☐ Vice Chairman ☐ Director ☐ Director □ President □ President □ Vice President ☐Vice President ☐Sccretary ☐ 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. (Typed or printed name and capacity of person signing application)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

MHP INVESTMENTS & CONSULTING, INC

is a

Corporation

formed or registered on 05/01/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131260830.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 10/21/2021 that have been posted, and by documents delivered to this office electronically through 10/22/2021 @ 16:10:46.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 10/22/2021 @ 16:10:46 in accordance with applicable law. This certificate is assigned Confirmation Number 13530666



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trudemarks, trade names" and select "Frequently Asked Questions."



Business Home Business Information Business Search

FAQs, Glossary and Information



Certificate Validation

Certificate of Fact of Good Standing #13530666 was issued by our office.

Confirmation #	13530666
Issued on	10/22/2021
Name	MHP INVESTMENTS & CONSULTING, INC
ID number	20131260830

Back

Terms & conditions | Browser compatibility