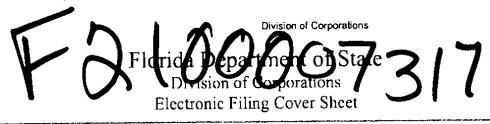
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To:

Division of Corporations

Page: 2 of 6

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FOREIGN PROFIT/NONPROFIT CORPORATION MGG US INC.

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 	Estimated Charge	\$78.75

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Corporate Filing Menu

S. HAWKES Help

DEC _ = 2021

From Laura Rodrig

Page: 3 of 6

COVER LETTER

10: Registration Section Division of Corpor			
SUBJECT: MGG US INC	÷.		
	Name of corporation	- must include suffix	
Dear Sir or Madam:			
"Certificate of Existence,"	by Foreign Corporation for or "Certificate of Good Stan orporation to transact busine	ding" and check are sub-	
Please return all correspond	lence concerning this matter	to the following:	
Cheyenne Moseley			
***************************************	Name of	Person	
Legalzoom.com, inc.			
	Firm/Corr	npany	
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t de marie en 1887 de 2000 france en 200 de 200 de 200 de 200 en 200 de 200 de 200 de 200 de 200 de 200 de 200	City/State a	nd Zip code	
gwalkden@mongoliagrowthg	roup.com	-	
	E-mail address: (to be used	for future annual report n	otification)
For further information con	accoming this matter, please of	cail:	
Cheyenne Moseley	at (800	773-0888	
Name of Person	at (800 Area Cod	e Daytime Telepl	hone Number
STREET/COURI Registration Section Division of Corpor The Centre of Talk 2415 N. Monroe St Talkahassee, FL 33	on rations ahassee treet, Suite 810	MAHAING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations ?
	: FLORIDA DEPARTMENT	FOF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fec, Certificate of Status & Certified Copy

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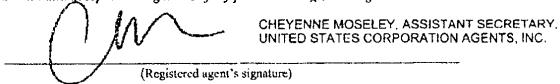
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

If name unavails		adopted for the purpose of transacting business in Flor		
Delaware	3.	7-3492957		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
11/05/2021	5.			
(Date of incorporation)		(Date of duration, if other than perpetual)		
401 West Kenne	dy Blvd., Ste 100, Tampa, Florida 33609	602. F.S., to determine penalty liability)		
401 West Kenne	edy Blvd., Ste 100, Tumpa, Florida 33609 (Principal offi	ce street address)		
401 West Kenne	(Principal offi			
	(Principal offi	g address, if different)		
	(Principal offi (Current mailin	g address, if different)		
Name and <u>stree</u>	(Principal offi (Current mailin et address of Florida registered agent: (P.C	g address, if different)		
Name and street	(Principal offi (Current mailing) 2t address of Florida registered agent: (P.C. United States Corporation Agents, Inc. 5575 S. Semoran Blvd., Suite 36	g address, if different)		

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



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: Harris Kupperman	C) Chairman	Name: Genevieve Jackson Name: 17841 Mission Oak Dr. Address: Lithia, Florida 33547	
OVice Chairman	Address: 2420 Ave Dr., Albizu Camos PMB 281	□Vice Chairman		
Director	Rincon, Puerto Rico 00677			
President	The state of the s	□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		Cl Vice President		
☐Secretary	☐ Treasurer	☐Secretary	Treasurer	
□Other	□Other	□Other	□Other	
□Chairman	Name:	Chainnan	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		□ Director	on the second of	
□President		□President	and the state of t	
□Vice President		□Vice President		
☐ Secretary	☐Treasurer	☐ Secretary	C) Treasurer	
□Other	□Other □	□Other	□Other	
Important Notice: individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department	echment will be image out of State Annual Ro	ed for reporting purposes only. Non-indexed eport form.	
12.				
The officer or dire she is aware that fi	ctor signing this document (and who is listed in number also information submitted in a document to the Depar	er 11 above) affirms the time of State constitution	nat the facts stated herein are true and that he or	

s.817.155, F.S.

13. Harris Kupperman, President

Page: 6 of 6

From: Laura Rodrigu



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MGG US INC." 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 SEVENTEENTH DAY OF DECEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MGG US INC." WAS INCORPORATED ON THE FIFTH DAY OF NOVEMBER, A.D. 2021.

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

Authentication: 205010537

Date: 12-17-21