Division of Corporations

→ 18506176383

⊙ 03-17-2025 8:46 AM . 3/13/25, 9:21 AM

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Τo	:
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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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FOREIGN PROFIT/NONPROFIT CORPORATION

miMeetings, Inc.

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\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help



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.

miMeetings, Inc	2.				
	orporation; must include "INCORPORATED," orp.," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"			
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting bu	usiness in Florida)		
2. DE	3.				
(State or countr 9/22/2008	y under the law of which it is incorporated) 5	• •			
* * -	of incorporation)	(Date of duration, if other than	(Date of duration, if other than perpetual)		
6					
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150				
7. 1126 S Federal H	wy 632, Ft. Lauderdale, FL 33316				
	(Principal offic	c <u>street</u> address)			
	(Company)	- 14 16 1100 10			
	(Current mailing	address, if different)			
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	3 日制版		
Name:	Corporate Creations Network Inc.		MAR 17		
Office Address:	801 US Highway I				
	North Palm Beach	, Florida 33408	AH I		
	(City)	(Zip code)	် အ ယ		
9. Registered age	ent's acceptance:		· ထ		
Having been nam	ed as registered agent and to accept servic				
	application, I hereby accept the appointmomorphy with the provisions of all statutes re				
and I am familiar	with and accept the obligations of my pos	ition as registered agent.			
/s/	Tymberlyn Teefey	Tymberlyn Teefey, Special Secr	etary		
_	(Registered agent's sig		-		

^{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: Evan Michaels	□Chairman	Name:		
□ Vice Chairman	Address:	□Vice Chairman	Address:		
Director	Ft. Lauderdale, FL 33316	□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	
□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. 12. /s/ Evan Michaels					
	Signature of Director	or Officer			
	ctor signing this document (and who is listed in number lise information submitted in a document to the Depar				

s.817.155, F.S. 13. CEO

Delaware The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAWARE, DO HEREBY CERTIFY "MIMEETINGS, 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 THIRTEENTH DAY OF MARCH, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MIMEETINGS,

INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF SEPTEMBER, A.D.

2008.

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

Charuni Patibanda-Sanchez, Secretary of State

C. B. Sanchen

Authentication: 203155955

Date: 03-13-25