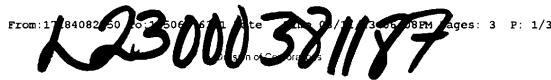
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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : USACORP INC. Account Number: I20130000019 Phone : (718)362-4789 Fax Number : (718)408-2550

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address: mendy@mcfcapitalllc.com

## FLORIDA LIMITED LIABILITY CO.

## Mazal In New Horizon VI LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | ()       |
| Page Count            | 02       |
| Estimated Charge      | \$125.00 |

Electronic Filing Menu

Corporate Filing Menu

The name and the Florida street address of the registered agent are:

| Mendel Fischer             |                        |            |  |
|----------------------------|------------------------|------------|--|
|                            | Name                   |            |  |
| 290 NW 165TH ST Suite M200 |                        |            |  |
| Florida street address (   | P.O. Box <u>XOT</u> ac | eceptable) |  |
| North Miami Beach          | FL.                    | 33169      |  |
| City                       | State                  | Zip        |  |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

/s/ Mendel Fischer

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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| "MGR" = Manager  | Membership information intentionally left blank  |
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| late of filing.)   | and cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed to's records.  |
|  |  |
| REQUIRED SIGNATURE:  |  |
| /s/ Mendel Fischer   |  |
|  |  |
| This document is executed in a larger that any false information of the control o | or an authorized representative of a member, accordance with section 605.0203 (1) (b). Florida Statutes, mation submitted in a document to the Department of State by as provided for in s.817-155, F.S. |
| This document is executed in a larger that any false information of the control o | accordance with section 605.0203 (1) (b). Florida Statutes, mation submitted in a document to the Department of State  |

Page 2 of 2

\$ 5.00 Certificate of Status (Optional)

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