m10000005748

	•
(Requestor's Name)	
(Address)	
•	
(Address)	
(City/State/Zip/Phone #)	
, , , ,	
PICK-UP WAIT MAIL	
(Durings Fight Mann)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



100188887261

12/22/10--01016--014 **125.00

FILED

10 DEC 22 AM II: 51

SECRELARY OF STATE

B. BOSTICK
DEC 2 8 2010
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporati	ons				
SUBJE	ECT: M.A.P. Inte					
		Nam	e of Limited Liability Comp	pany		
			lity Company for Authoriza ove referenced foreign limit			
Please	return all corresponden	ce concerning this mat	ter to the following:			
•	Jorge Riv	era				
			Name of Person			
			Firm/Company			
12689 58th Place North						
			Address			
	Royal Pal	m Beach, FL 334	111			
			City/State and Zip Code			
	iorge@w	ebkadoodle.co	nm		TAL SI	
	<u> jo.go@</u>	E-mail address: (to	be used for future annual r	eport notification)	AH AH AH	:
For fur	ther information concer	ming this matter, pleas	e call:		EC 22	T
	Jorge Rivera		at (561	₎ 667-1432		
	Nai	ne of Person	Area Code & Daytime	Telephone Number	II: 5	O
	MAILING ADDRE		STREET ADDRESS: Division of Corporations		58 IDA	
Registration Section		Registration Section				
	P.O. Box 6327 Tallahassee, FL 3231	4	Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rcle		
	sed is a check for the \$125.00 Filing Fee	te following amour \$130.00 Filing Fee Certificate of State	& \$155.00 Filing Fee	& \$160.00 Filing	Fee, Certificate ertified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

M.A.P. International, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	ten
Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-4555149 (FEI number, if applicable)	
April 2008 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 12689 58th Place North, Royal Palm Beach, Florida 33411	4 · · · · · · · · · · · · · · · · · · ·
(Street Address of Principal Office) If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows:	•
Jorge Rivera; 12689 58th Place North, Royal Palm Beach, Florida 33411	
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records to jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.)	in
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.) Jorge Rivera	

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:			
M.A.P. International, LLC			
If unavailable, the alternate to be used in the state of Florida is:			
The name and the Florida street address of the registered agent and office are: Jorge Rivera	SECH:	-10 DEC 22	endel
(Name) 12689 58th Place North	HASSEE, F		
Florida Street Address (P.O. Box NOT ACCEPTABLE)	STATE	AM II: 58	U
Royal Palm Beach, FL 33411 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, 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 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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PAGE 1

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "M.A.P. INTERNATIONAL, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF NOVEMBER, A.D. 2010.

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

10 DEC 22 AMII: 58
SEURELARY OF STATE
ANASSEE FLORINA

ARY'S OF THE PROPERTY OF THE P

4130399 8300

101060827

AUTHENTICATION: 8383835

DATE: 11-30-10