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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MPS Labs, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Melinda Milligan
Name of Person
MPS Labs, LLC
Firm/Company
848 N. Rainbow Blvd., Suite 3329
Address
Las Vegas, NV 89107
City/State and Zip Code
mjm11711@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melinda Milligan at (954) 673-6679
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\int\\$\$125.00 \text{ Filing Fee}\$ Certificate of Status \$\int\\$\$155.00 \text{ Filing Fee & Certificate Copy}\$ \$\int\\$\$160.00 \text{ Filing Fee, Certificate Copy}\$ Certified 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 LIARITATY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. MPS Labs, LLC	- .
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
MPS Laboratories, LLC	-
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liab	writter
Company, "L.L.C," "LLC.")	iity
2. Nevada 3. 45-5199951	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	-
company is organized)	
4. May 3, 2012 5. Perpetual	_
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. November 1, 2012	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	-
7. 848 N. Rainbow Blvd., Suite 3329	-
Las Vegas, NV 89107	
(Street Address of Principal Office)	-
8. If limited liability company is a manager-managed company, check here	
8. If limited liability company is a manager-managed company, check here	7
9. The name and usual business addresses of the managing members or managers are as follows:	
	O
Patrick Ingram	
15970 W. State Road 84 Unit 413	
10070 W. Otate Road of Gint 410	-
Weston, FL 33326	_
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10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a	DIUS III
translation of the certificate under eath of the translator must be submitted.)	
, ·	
11. Nature of business or purposes to be conducted or promoted in Florida: E-commerce of beauty	-
products	<u>.</u> .
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	

Typed or printed name of signee

Melinda Milligan

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

ÇERTIFICATE 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	f the Limited Liability Company is:	
MPS Labs	s, LLC	
If unavailable, t	the alternate to be used in the state of Florida is:	
MPS Labor	oratories, LLC	
2. The name an	nd the Florida street address of the registered agent and office are:	
	Patrick Ingram	
	(Name)	
	15970 West State Road 84 Unit 413	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Weston FL 33326	
	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)



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, MPS LABS LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 3, 2012, and is in good standing in this state.

Certified By: Sandy Edwards
Certificate Number: C20121101-2554
You may verify this certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on November 7, 2012.

ROSS MILLER Secretary of State