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To:

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Fax Number : (850) 617-6383

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Zmail Addre	88:	 	

Foreign Limited Liability Company mac avalon, llc

Certificate of Status	0
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Page Count	05
Estimated Charge	\$125.00

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Registration Section
Division of Corporations

TQ:

COVER LETTER

SUBJECT: MAC AVOLGA LLC		
Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.		
Please return all correspondence concerning this matter to the following:		
Oscal Gessales-Ragni Esq.		
GRSh, LLP	E C	2013
Firm/Company	<u> </u>	APR
20861 BISCAYAC Blud. UNIT 306	Baseeri Baseeri	+
Accorda, Fl. 33180 Ciry/State and Zip Code	OF STA	₽Ħ 9:
	E H	84
OGRIFICES @ RShlaw.com	-	
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, pieuse call:		
STAZI HERSKEY at 305) 7920439		
Name of Person Area Code & Daytime Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 STREET ADDRESS: Division of Corporations Registration Section Registration Section Clifton Building		
Tullahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: \$\square\$	enificate	
Cortificate of Status Certified Copy of Status & Certified	Сору	

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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 FOR LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1.	'EIGN	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Fiorida and attach a copy of the wicconsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company." "L.L.C." "LLC.")	ritten	
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)		
4. 2 20 13 (Date of Organization) 5. PERPETVAC (Duration: Year limited liability company will cease to exist or "perpetual")	•	
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. 2560 NE 1900 Sheer #3		
Avenue Flora 33180 (Street Address of Principal Office)	2013	
8. If limited liability company is a manager-managed company, check here	APR-	N
9. The name and usual business addresses of the managing members or managers are as follows:	MA 4-	
Promethous Management, L.W.	7 :6	
	3 0	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rethe jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)	ni atnoc	L
11. Nature of business or purposes to be conducted or promoted in Florida:		
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 than 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.)		
NICOLOG PAYON Typed or printed name of signee		

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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:		
MAC AVALON, LLC	-	
If unavailable, the alternate to be used in the state of Florida is:		
	- 29	
2. The name and the Florida street address of the registered agent and office are:	2013 APR	
OSCAR GRISALES	¥-4	(manage
	R	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	M 9: 48	
Arenna FL 33188		

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 1

Filing Fee for Application

\$ 25.00

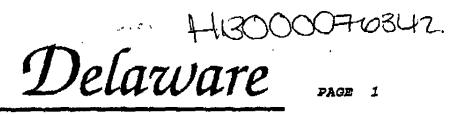
Designation of Registered Agent

\$ 30.00

Certified Copy (optional)

\$ 5.00

Certificate of Status (optional)



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBY CERTIFY "MAC AVALON 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 FIRST DAY OF APRIL, A.D. 2013.

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You may verify this certificate online at corp. delaware. gov/euthrer. shimi

ADTHENTICATION: 0326767

DATE: 04-01-19

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