# M14000000941

Office Use Only



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ACCOUNT NO. : I2000000195 REFERENCE : 7833946 997482 AUTHORIZATION :( COST LIMIT : \$ \1.25.00 ORDER DATE: February 7, 2014 ORDER TIME : 9:02 AM ORDER NO. : 997482-005 CUSTOMER NO: 7833946 FOREIGN FILINGS NAME: M-311 MERIDIAN INVESTOR, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY \_ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Susie Knight -- EXT# 52956

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C	ii," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The altern Liability Company," "L.L.C," or "L.L.C,")	ate name must include "Limited
<sub>2.</sub> Delaware	
(Jurisdiction under the law of which foreign limited liability (FEI number, if a company is organized)	pplicable)
4	,
(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	<b>201</b>
<sub>5.</sub> 1691 Michigan Avenue, Ste. 215	
Miami Beach, FL 33139	<del></del>
(Street Address of Principal Office)	SSIE FE
<sub>6.</sub> 1691 Michigan Avenue, Ste. 215	- S 5
Miami Beach, FL 33139	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority t	o manage is/are:
MC Manager, LLC (MGR)	
1691 Michigan Avenue, Ste. 215	
Miami Beach, FL 33139	
8. Attached is an original certificate of existence, no more than 90 days old, duly aut naving custody of records in the jurisdiction under the law of which it is organized. (acceptable. If the certificate is in a foreign language, a translation of the certificate unust be submitted)	(A photocopy is not

Camilo Miguel, Jr., President

Typed or printed name of signee

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	e of the Limited Liability C	•	
lf unavailab	le, the alternate to be used i	n the state of Florida is:	
2. The name	_	ress of the registered agent and office are:	2014 FEB 10 SACRETAR PALLAHASS
	1201 Hays S	(Name)	Y OF SID
		t Address (P.O. Box NOT ACCEPTABLE)	- 5 A
	Tallahassee	FL 32301	-
		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 605, Florida Statutes.

Sue G. Knight Assistant Vice President

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ Certified Copy (optional) 30.00 5.00 Certificate of Status (optional)

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: M-311 MERIDIAN INVESTOR, 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 husiness in Florida.

Please return all correspondence concerning this matter to the following:

Camilo Miguel, Jr.			
Name of Person			
MC Manager, LLC			
Firm/Company	-		
1691 Michigan Avenue, Ste. 215	7A.11	2014 FEB	
Address		اما ام	~7
Miami Beach, FL 33139	ian) Assi	0	
City/State and Zip Code		<b>N</b>	
cmigueljr@yahoo.com	100 m	\$	
E-mail address: (to be used for future annual report notification)	700	(A)	

For further information concerning this matter, please call:

Camilo Miguel, Jr.

<sub>at</sub> 305

531-2426

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy

## Delaware

DAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "M-311 MERIDIAN INVESTOR, 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 SEVENTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "M-311 MERIDIAN INVESTOR, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JUNE, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5359030 8300

140149980

AUTHENTY CATION: 1120407

DATE: 02-07-14

You may verify this certificate online at corp.delaware.gov/authver.shtml