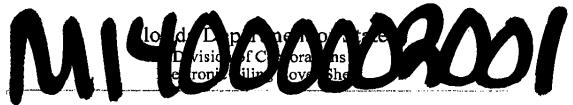
Division of Corporations

Page 1 of 1



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.

(((H14000067422 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RICHARDS & ASSOCIATES, PA

Account Number : 120110000091

Phone Fax Number

: (305)858-9900 : (305)285-0015

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

### Foreign Limited Liability Company MRO GROUP LLC

عدد مد مصورات الأفلاد في المستور المس	وي والمساحد المنافعة والمساحد المساحد المساحد المساحد المساحد المساحد المساحد المساحد المساحد المساحد
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March 21, 2014

FLORIDA DEPARTMENT OF STATE Division of Corporations

RICEARDS & ASSOCIATES PA

SUBJECT: MRO GROUP LLC REF: W14000018082

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

List the title for the individual listed in #7.

If you have any further questions concerning your document, please call (850) 245-6051.

Justin M Shivers Regulatory Specialist II

FAX Aud. #: H14000067422 Letter Number: 014A00006108

Registration/Qualification Section

Yilan Kirens (850) 617-6383.

RECEIVED Ŧ. 14 HAR 25

P.O BOX 6327 - Tallahassee, Florida 32314

#### **COVER LETTER**

TO: Registration Section **Division of Corporations** 

MRO GROUP LLC

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 Plorida..

Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

## YILAN RIVERO

Name of Person

RICHARDS & ASSOCIATES, P.A.

Firm/Company

2665 SOUTH BAYSHORE DRIVE, SUITE 703

Address

MIAMI, FLORIDA 33133

City/State and Zip Code

YRIVERO@RICHARDS-LAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YILAN RIVERO

Name of Contact Person

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, Centificate of Status & Certified Copy

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

N COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUFFOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLO	IBMITTED TO REG	ISTER A
MRO GROUP LLC	KIIZA:	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.	" or "LLC")	·
		<del></del> .
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternationability Company," "L.L.C," or "LLC.")	e name must include "Li	imited
DELAWARE 3. 46-4856607		
(Jurisdiction under the law of which foreign limited liability (FEI number, if approximately property of the law of which foreign limited liability (FEI number, if approximately property of the law of which foreign limited liability (FEI number, if approximately property of the law of which foreign limited liability (FEI number, if approximately property of the law of which foreign limited liability (FEI number, if approximately property of the law of which foreign limited liability (FEI number) (FEI number	olicable)	
FEBRUARY 3, 2014		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
2665 SOUTH BAYSHORE DRIVE, SUITE 703		
MIAMI, FLORIDA 33133		
(Street Address of Principal Office) 2665 SOUTH BAYSHORE DRIVE, SUITE 703		<del></del>
MIAMI, FLORIDA 33133	.C: Na	
(Mailing Address)		- Decrea
7. The name, title or capacity and address of the person(s) who has/have authority to	manago is/ar	
FERNAN RODRIGUEZ, MANAGER	25 SS	
2665 SOUTH BAYSHORE DRIVE, SUITE 703	TO A	m
MIAMI, FLORIDA 33133	9.7	Townson .
	32	_
. Attached is an original certificate of existence, no more than 90 days old, duly auth		
aving custody of records in the jurisdiction under the law of which it is organized. (A		
ecceptable. If the certificate is in a foreign language, a translation of the certificate uncount be submitted)	der oath of the tran	islator
Fernan Rodriguez		
Signature of an authorized person accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of per	increthed the facts stated has	rein are tere
n aware that any false information submitted in a document to the Department of State constitutes a third degree felony as pro		
FERNAN RODRIGUEZ		

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.

II UNBYANAUN	e, the alternate to be use	ed in the state of Florida is:		
2. The name	and the Florida street a	address of the registered agent and office are:	<del></del>	
	WORLD CO	ORPORATE SERVICES, IN	IC.	
		(Name)	· ·	
· ·	2665 SOUTH	I BAYSHORE DRIVE, SUITE 7	′03 ≩ୁ	2014
	Florida S	Street Address (P.O. Box NOT ACCEPTABLE)		MAR
	MIAMI	FL 33133	A S	R 25
		City/State/Zip		AP 1
liability comp registered ag statutes relati	oany at the place design ent and agree to act in t ing to the proper and co	ent and to accept service of process for the abouted in this certificate, I hereby accept the appoints capacity. I further agree to comply with the implete performance of my duties, and I am fair as registered agent as provided for in Chapte (Signature)	pointment as he provision miliar with c	s of all

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

# Delaware

PAGE 1

## The First State

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

DELAWARE, DO HEREBY CERTIFY "MRO GROUP 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 MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MRO GROUP LLC" WAS FORMED ON THE THIRD DAY OF FEBRUARY, A.D. 2014.

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

2014 HAR 25 AH 10: 44

5**4**75554 8300

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verify this certificate online

Jeffrey W. Bullock, Secretary of State

UTHENT CATION: 1220634

DATE: 03-19-14