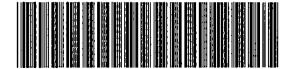
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(Requestor's Name)
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(Document Number)
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COVER LETTER

Existence, and checo		ility Company for Authorization to Transact Business in Florida bove referenced foreign limited liability company to transact bus atter to the following: Name of Person		
(Gary Herman	<u> </u>	_	
		Name of Person	-	
<u> </u>	MPH Ventures.	Name of Person		
	MPH Ventures.			
_		LLC		
		Firm/Company	_	
1	1719 Sparrow L	ane		
		Address	_	
\	Weston, FL 333	327		
_		City/State and Zip Code	-	
g	herman@cons	olidatedcredit.org		
For further informa	E-mail address: tion concerning this matter, pleas	(to be used for future annual report notification) se call:	2014 HA	Ti.
Gary	/ Herman	ູ, 954 ຸ 377-9201 🚆		ericeleri Gereleri
	Name of Contact Person	Area Code Daytime Telephone Number	~ ==	
Division of Registration P.O. Box	G ADDRESS: of Corporations on Section 6327 ee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	AM II: 33	E Pay Salang

Certificate of Status

□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate
Certified Copy of Status & Certified Copy

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:

1. MPH Ventures, 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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. State of Delaware 3. 26-2719631
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. March 1, 2014
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 1719 Sparrow Lane
Weston, FL 33327
(Street Address of Principal Office)
6. 1719 Sparrow Lane
Weston, FL 33327
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ares
Gary Herman, Managing Member
1719 Sparrow Lane
Weston, FL 33327
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the 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 oath of the translator must be submitted) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are translator and 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.) Gary Herman
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.

1.	The name	of the	Limited	Liability	Company	is:
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MPH Ventures, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Gary Herma	n	∵ ~ 3	
	(Name)	2014 HAY	and a
1719 Sparrow Lane			Puka
Florida Str	SEM 2		
Weston	FL 33327	# 1:3	in and
	City/State/Zip	製品 公	

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.

(Signature)

\$ 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 THAT "MPH VENTURES LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR

REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY

AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENT HAS BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE FOURTEENTH DAY OF FEBRUARY, A.D. 2008, AT 12:04 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY

COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

2011 HAY 12 AH II: 33

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AUTHENTY CATION: 1314796

DATE: 04-23-14

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