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FILED 2014 SEP -2 AM 9: 50 SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

| TO: | Registration Section |
|-----|--------------------------|
| | Division of Cornerations |

| SUBJECT: | Miller Munoz Pelaez Castro 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 m | atter to the fol | lowing: | | | |
|---|--|----------------------------------|--------------------------|--|--|
| William Miller | | | | | |
| | Namo | of Person | | | |
| Miller Munoz P | LLC | | | | |
| | Firm/Company | | | | |
| 3865 Buckthori | 3865 Buckthorne Drive, Unit G | | | | |
| | A | ddress | | | |
| Orange Park, F | FL 320 | 65 | | | |
| | City/State and Zip Code | | | | |
| williamglennmil | ler@g | mail.cor | m | | |
| E-mail address | s: (to be used fo | r future annual rep | ort notification) | | |
| For further information concerning this matter, plea | ase call: | | | | |
| William Miller | | 404 | Daytime Telephone Number | | |
| Name of Contact Person | | Area Code | Daytime Telephone Number | | |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 | Division o Registratio Clifton Bu 2661 Exec | | sle | | |
| England is a short farth following and | | | | | |
| Enclosed is a check for the following amo \$\Bigsig \$125.00 \text{ Filing Fee}\$ Certificate of the following amo Certificate of the following amount amou | ing Fee & | \$155.00 Filing Certified Cop | | | |

' 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. Miller Munoz Pelaez Castro LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

MMPC, 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 "LL.C.")

| Lia | bility Company," "L.L.C," or "LLC.") | | |
|-----|--|--|-----|
| 2. | Delaware | y 3. 46-3640503 (FEI number, if applicable) | |
| (| (Jurisdiction under the law of which foreign limited liability company is organized) | | |
| 4. | n/a | | |
| | (See sections 605.0904 & 605.090 | in Florida, if prior to registration.) 05, F.S. to determine penalty liability) | |
| 5. | 2285 Kingsley Ave., Suite E | | |
| | Orange Park, FL 32073 | | 250 |

(Street Address of Principal Office)
2285 Kingsley Ave., Suite E

Orange Park, FL 32073

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

William Miller, Managing Member

3865 Buckthorne Drive, Unit G

Orange Park FL 32065

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 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.)

William G Miller

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 Limited Liability Company is: OZ Pelaez Castro LLC | |
|------------------------------|---|---------------|
| If unavailable, the MMPC, LL | alternate to be used in the state of Florida is: | ····· |
| 2. The name and t | he Florida street address of the registered agent and office are: | 7 SET |
| V | Villiam Glenn Miller | 1988 F. T. L. |
| | (Name) | 劉明で下 |
| 2 | 285 Kingsley Ave, Suite E | |
| | Florida Street Address (P.O. Box NOT ACCEPTABLE) | 5 6 |
| 0 | range Park, FL 32073 | |
| | 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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



PAGE :

The First State

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

DELAWARE, DO HEREBY CERTIFY THAT "MILLER MUNOZ PELAEZ CASTRO,

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 FIFTH DAY OF SEPTEMBER,

A.D. 2013, AT 12:41 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.

5394053 8315

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AUTHENTY CATION: 1638222

DATE: 08-21-14

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