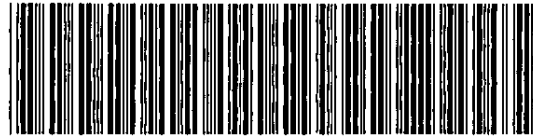


MI4000006750



000263950870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special instructions to Filing Officer:

MI4-57220

Office Use Only

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 SEP 17 PM 4:12
NOTICE TO APPLICANT
TO APPEAR AT THE
SUFFOLK COUNTY OFFICE

FILED
2014 SEP 17 A 10:30
DEPARTMENT OF STATE
SUFFOLK COUNTY OFFICE

B. BOSTICK
SEP 19 2014
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 301275 7833946

AUTHORIZATION

COST LIMIT : \$ 130.00

Spudler

ORDER DATE : September 17, 2014

ORDER TIME : 3:41 PM

ORDER NO. : 301275-005

CUSTOMER NO: 7833946

FOREIGN FILINGS

NAME: M-4000 ALTON MGR, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

2014 SEP 17 AM 10:30
STATE

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: M-4000 ALTON MGR, 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 matter to the following:

Camilo Miguel, Jr.

Name of Person

MC Manager, LLC

Firm/Company

119 Washington Ave., Ste. 505

Address

Miami Beach, FL 33139

City/State and Zip Code

cmigueljr@yahoo.com

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

For further information concerning this matter, please call:

Camilo Miguel, Jr.

Name of Contact Person

at (305)

Area Code

531-2426

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

FILED
 2014 SEP 17 10 10 AM
 TALLAHASSEE, FL
 DIVISION OF CORPORATIONS

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. M-4000 ALTON MGR, 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. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)


4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 119 Washington Ave., Ste. 505
Miami Beach, FL 33139
(Street Address of Principal Office)

6. 119 Washington Ave., Ste. 505
Miami Beach, FL 33139
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
MC Manager, LLC (MGR)
119 Washington Ave., Ste. 505
Miami Beach, FL 33139

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.)

Camilo Miguel, Jr.

Typed or printed name of signee

FILED
RECEIVED
SEP 11 11 AM '11
STATE

**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:

M-4000 ALTON MGR, 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:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL 32301

City/State/Zip

SEP 11 11 AM '10
TALLAHASSEE, FLORIDA

FILED

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.

 **Asst VP**

(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 "M-4000 ALTON MGR, 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 SEVENTEENTH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "M-4000 ALTON MGR, LLC" WAS FORMED ON THE THIRD DAY OF SEPTEMBER, A.D. 2014.

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

FILED
2014 SEP 17 11 A M
OFFICE OF THE SECRETARY OF STATE
DELAWARE

5596557 8300

141188989

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1705112

DATE: 09-17-14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 18, 2014

CSC
M-4000 ALTON MGR, LLC
COURTNEY WILLIAMS

SUBJECT: M-4000 ALTON MGR, LLC
Ref. Number: W14000057220

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 SEP 18 PM 2:07
TO AGENCY OF
SUFFICIENCY OF FILING

RESUBMIT
Please give original
submission date as file date.

We have received your document for M-4000 ALTON MGR, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Barbara Bostick
Regulatory Specialist II

Letter Number: 614A00020014

FILED
2014 SEP 17 A 10:30
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA