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REGISTRATION
REGISTRAT

2015 APR 27 PH 12: 06

APR 28 2015 BYUCE CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE: 575627 8036344

AUTHORIZATION : MILLOURING

COST LIMIT : \\$ \frac{1}{2}5.00

ORDER DATE : April 2, 2015

ORDER TIME : 9:51 AM

ORDER NO. : 575627-001

CUSTOMER NO: 8036344

FOREIGN FILINGS

NAME: MUTUAL PROPERTIES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen -- EXT# 62974

EXAMINER:

2616 APR 27 PM 12: 01

COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: Mutual Prope	erties LLC	
	Name of Limited Liability Company	_
	nited Liability Company for Authorization to Transact Business in Florid ster the above referenced foreign limited liability company to transact bu	
Please return all correspondence concernin	ng this matter to the following:	
	Name of Person	_
	Firm/Company	
	гит/ со трану	
	Address	··•
	City/State and Zip Code	_
E-mai	address: (to be used for future annual report notification)	_
For further information concerning this mat	tter, please call:	
	at ()	200
Name of Contact 1	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	ASSEE FLEADI ASSEE FLEADIC
	g amount: .00 Filing Fee & \$\Pi\$\$ \$\	

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 Mutual Properties 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 "Li Liability Company," "L.L.C," or "LLC.")	_ mited	
₂ Delaware		
2. (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	-	
4 01-01-2015		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	-	
5. 200 South Biscayne Boulevard, Suite 1120	_	
Miami, FL, US, 33131	-	
(Street Address of Principal Office)	-	
6. PD BOY 820	_	
Hallandale A 33009 (Mailing Address)	21192	-
(Mailing Address)	구. 건	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are	27	7
Gideon MG Gratsiani - Member.	P	Ķ
200 S Biscayne Blvd, Suite 1120	<u></u>	Sec. of
Msami, Re 33131	<u></u>	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the off 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 transmust be submitted)		
61/600 ATTS WAV T		
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 here 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.)	in are to	ue, l
Gideon MG Gratsiani		

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.

Mutual Prope	of the Limited Liability C	Company is.	
If unavailable	e, the alternate to be used	in the state of Florida is:	
2. The name	and the Florida street add	ress of the registered agent and office are:	Pie S
	Corporation Service Cor	mpany	
		(Name)	APR
	1201 Hays Street		
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	0F 5 TA E PL 9K
	Tallahassee	32301 FL	4.0196 2.006
		City/State/Zip	
liability comp registered age statutes relati	any at the place designated ent and agree to act in this ng to the proper and compligations of my position as a Corporation Service Comp	Harry Harry	nt as isions of all vith and
	\$ 100		
		5.00 Designation of Registered Agent 0.00 Certified Copy (optional)	
		0.00 Certified Copy (optional) 0.00 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 "MUTUAL PROPERTIES 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 TWENTY-SEVENTH DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MUTUAL PROPERTIES LLC" WAS FORMED ON THE SECOND DAY OF APRIL, A.D. 2014.

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

5509632 8300

150567484

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 2323310

DATE: 04-27-15

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