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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** WillDom 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:

Ed Tsuji

\_\_\_\_\_  
Name of Person

MyNewCompany.com, Inc.

\_\_\_\_\_  
Firm/Company

187 E. Warm Springs Road, Suite B

\_\_\_\_\_  
Address

Las Vegas, NV 89119

\_\_\_\_\_  
City/State and Zip Code

orders@mynewcompany.com

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

For further information concerning this matter, please call:

Ed Tsuji

702

362-2677

\_\_\_\_\_  
Name of Contact Person

at (\_\_\_\_\_) \_\_\_\_\_  
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

Enclosed is a check for the following amount:

- |                       |  |   |  |
|-----------------------|--|---|--|
| • \$125.00 Filing Fee | • \$130.00 Filing Fee &<br>Certificate of Status | • \$155.00 Filing Fee &<br>Certified Copy | • \$160.00 Filing Fee, Certificate<br>of Status & Certified Copy |
|-----------------------|--|---|--|

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

I enclose Duplicates of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida.

Also enclosed is a Certificate of Good Standing from the State of Wyoming.

Please file the attached Application and return Proof of Filing via the enclosed pre-paid FedEx envelope.

Payment for the required fees is enclosed (\$125.00 to Department of State).

If you have any questions or concerns, do not hesitate to contact me.

Sincerely,

The Client Services Team  
MyNewCompany.com, Inc.  
187 E. Warm Springs Rd., Suite B  
Las Vegas, NV 89119

Phone: 702-362-2677  
Fax: 702-825-2581

**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. WillDom 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. Wyoming 3. 38-3930754  
(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. 2 Wall St., 10th Fl.  
New York, NY 10005  
(Street Address of Principal Office)


6. c/o Feuer & Orlando, LLP - 2 Wall St., 10th Fl.  
New York, NY 10005  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: InCorp Services, Inc.  
Office Address: 17888 67th Court North  
Loxahatchee, Florida 33470  
(City) (Zip code)

**Registered agent's acceptance:**

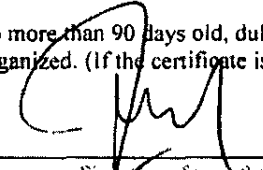
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
Chris Mershon, Asst. Sec.  
(Registered agent's signature)

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

Hector Javier Ibanez Padilla, AMBR - Av. Santa Fe 2459, Buenos Aires, Argentina C1123AAG  
Martin Suarez Viacava, AMBR - Av. Santa Fe 2459, Buenos Aires, Argentina C1123AAG  
Andres Eduardo Perea Ibanez, AMBR - Av. Santa Fe 2459, Buenos Aires, Argentina C1123AAG

9. Attached is a 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. (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.)

Hector Javier Ibanez Padilla, AMBR  
Typed or printed name of signee

**STATE OF WYOMING**  
**Office of the Secretary of State**

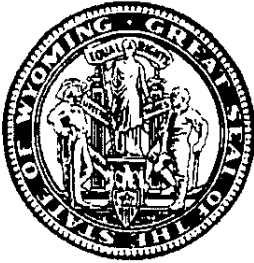
I, EDWARD F. MURRAY, III, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

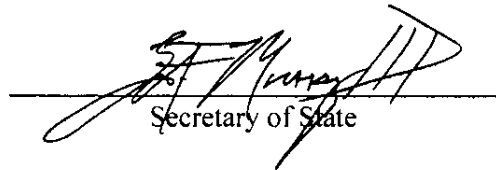
**WillDom LLC**  
is a  
**Limited Liability Company**

formed or qualified under the laws of Wyoming did on **May 5, 2014**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2014-000664270**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 28th day of May, 2015 at 10:28 AM. This certificate is assigned 017887433.



  
Secretary of State