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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

Fax Number

: (561)694-1639

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 Phone

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| Email | Address: | | | | |
|-------|----------|--|--|--|--|
| 학때작고구 | vacress: | | | | |

Foreign Limited Liability Company

VINKA, LLC. Certificate of Status Certified Copy 0 Page Count Estimated Charge \$130.00

JUL 3 0 2015

J SHIVERS

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 WABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| VINKA, LLC. | | |
|--|--|--|
| (Name of Fore | ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or " | LLC.") |
| | ternate name adopted for the purpose of transacting business in Florida. The alternate name | must include "Limited |
| iability Company," "L.L.C," Delaware | or "LLC.") | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability (FEI number, if applicable) | ······································ |
| · | (Date hirst transacted business in Florida, if prior to registration.) | |
| 4312 SW 186th Ave. | (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) | |
| Miramar, FL 33029 | (Street Address of Principal Office) | |
| 4312 SW 186th Avc. | (2) (Act Vomesk of Limebut Office) | |
| Miramar, FL 33029 | (Mailing Address) | |
| . Name and street addres | s of Florida registered agent: (P.O. Box NOT acceptable) | |
| Name: | Worldwide Corporate Administrators LLC | |
| Office Address: | 2330 Ponce De Leon Blvd | |
| | Coral Gables , Florida 33134 (Zip code) | |
| his application. I hareby | gistered agent and to accept service of process for the above stated corporation of accept the appointment acresistered agent and agree to act in this capacity. I fistatutes felative to the proper and complete performance of my duties, and I am | urther agree to comply familiar with and occept |
| | (Registered agent's signature) | ु ज |
| 8. The name, title or cape | acity and address of the person(s) who has/have authority to manage is/are: | |
| Edgardo Manuel Guzman | , Manager - 4312 5W 186th Ave., Miramar, FL 33029 | <u></u> |
| | | |
| V**V* | | |
| Attached is a certificate urisdiction under the law of the translator must be so | of existence, no more than 90 days old, duly authenticated by the official having of which it is organized. (The certificate is in a foreign language, a translation of ubmitted) Signature of exception person | custody of records in the the certificate under oath |
| This document is executed submitted in a document to | in accordance with section 605 5203 (1) (b), Florida Statutes, I am aware that any of the Department of States constitutes a third degree felony as provided for in 8.817. | false information 155, F.S. |
| | Edgardo Manuel Guzman, Manager by: Kristine Duran, Attorney-in-Fact | |
| | Typed or printed name of signee | • |

Delaware

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "VINKA, 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-NINTH DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VINKA, LLC."
WAS FORMED ON THE TWENTY-SECOND DAY OF JUNE, A.D. 2015.

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

15 JUL 29 AM 7: 09

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You may Verify this certificate online at corp. delaware, gov/authvar. shtml

AUTHENTICATION: 2599515

DATE: 07-29-15