M15000009805

| (Requestor's Name) | | | | | | |
|---|--|--|--|--|--|--|
| | | | | | | |
| (Address) | | | | | | |
| | | | | | | |
| (4.11) | | | | | | |
| (Address) | | | | | | |
| | | | | | | |
| (City/State/Zip/Phone #) | | | | | | |
| · | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
| | | | | | | |
| (Business Entity Name) | | | | | | |
| (Dusiness Littly Maine) | | | | | | |
| | | | | | | |
| (Document Number) | | | | | | |
| | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| | | | | | | |
| <u> </u> | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Office Use Only



500279847855

FILED

2015 DEC -8 AM 8: 35

SECRELARY DE STATE
SEC

DEPARTMENT OF STATE

15 DEC -8 PM 4: 20

N. Ouldown NEC - 9 2061

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 902654 7833946

AUTHORIZATION : Smill Bless

COST LIMIT : \$ 125.00

ORDER DATE: December 8, 2015

ORDER TIME : 2:24 PM

ORDER NO. : 902654-005

CUSTOMER NO: 7833946

FOREIGN FILINGS

NAME: PPVH, 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: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:

Registration Section

| Division of Corporations | | | | | |
|--|--|---|------------|--|-----|
| PPVH, LLC SUBJECT: | | | | | |
| | Name of | Limited Liability (| Company | | |
| The enclosed "Application by Foreign Existence, and check are submitted to | | | | | |
| Please return all correspondence conce | erning this matter to the | following: | | | |
| Camilo Miguel, Jr. | | · | | | |
| | N: | ame of Person | | | |
| PPVH, LLC | | | | | |
| Firm/Company | | | | | |
| 119 Washington Av | ve., Ste. 505 | | | | |
| | | Address | | | |
| Miami Beach, FL 3 | 33139 | | | | |
| | City/S | ate and Zip Code | | | |
| cmigueljr@yahoo.com | m | | | | |
| E-1 | mail address: (to be used | for future annual | report not | ification) | |
| For further information concerning this | s matter, please call: | | | | |
| Camilo Miguel, Jr. | | 305 at (| 531-24 | 26 | |
| Name of Co | ntact Person | Area Code | Day | time 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 | | | |
| - | nmount: \$130.00 Filing Fee & ertificate of Status | □ \$155.00 Filin Certified Copy | g Fee & | ☐ \$160.00 Filing Fee, Certific of Status & Certified Copy | ate |

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 COMPANYTO TRANSACT RUSINESS. IN THE STATE OF FLORIDA:

| COMPANY TO TRANSACT BU | ISINESS IN THE STATE OF FLORIDA: | | |
|--|--|--|---|
| PPVH, LLC | | | |
| (Name of For | eign Limited Liability Company; must include | "Limited Liability Company," "L.L.C.," or "LL | .C.") |
| (If name unavailable, enter a Liability Company," "L.L.C, | | cting business in Florida. The alternate name m | ust include "Limited |
| 2. DE | 3. | | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI number, if applicable) | |
| 4. | | · | • |
| | (Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S. | da, if prior to registration.) . to determine penalty liability) | |
| 5. 119 Washington Aven | ue, Suite 505 | | |
| Miami Beach, FL 331 | | | |
| | (Street Address of Principal C | office) | R. |
| 6. 119 Washington Avenu | ie, Suite 505 | | |
| Miami Beach, FL 331 | 39 | | Signal or |
| | (Mailing Address) | | ing z |
| 7. Name and street address | s of Florida registered agent: (P.O. Box) | NOT acceptable) | 55.00 |
| Name: | Corporation Service Company | | |
| Office Address: | 1201 Hays Street | | |
| | Tallahassee | , Florida 32301 | |
| | (City) | (Zip code) | |
| designated in this applica to complywith the provision | gistered agent and to accept service of protion, I hereby accept the appointment as toons of all statutes relative to the proper any position as registered agent. | ocess for the above stated limited liability registered agent and agree to act in this cand complete performance of my duties, and Melissa Zende | pacity. I further agree od I am familiar with and I |
| | (Registered agent | 1 250c. VICC I ICSIQ | ent |
| • | scity and address of the person(s) who has/ | have authority to manage is/are: | |
| MC Manager, LLC, Mem | Der | | |
| 119 Washington Ave., Ste | 5. 505 | | |
| Miami Beach, FL 33139 | | | |
| | of which it is organized. (If the certificate in th | aly authenticated by the official having cust is in a foreign language, a translation of the | |
| | Signature of an auth | orized person | |
| This document is executed submitted in a document to | in accordance with section 605.0203 (1) (| b), Florida Statutes. I am aware that any fal I degree felony as provided for in s.817.155 | se information 5. F.S. |
| | Camilo Mignel Ir Chief Executive Offi | • | , - - |

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PPVH, 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 EIGHTH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PPVH, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF NOVEMBER, A.D. 2015.

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

Authentication: 10567532

Date: 12-08-15