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Tc:

Division of Corporations

Fax Number : (850)617-6383

Eron:

Account Name : HARVARD BUSINESS SERVICES,

Addount Number : I20080000045 Phone : (302)645-7400

Fax Number : (302)645-1280

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: matt@mcswebdev.com

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Foreign Limited Liability Company MCS Web Dev 1T Solutions LLC

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J. HARRIS

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To: 18506176383 Pa (((H16000020293 3)))

· APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SLIBMITHED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: MCS Web Dev IT Solutions 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 nuts include "Limited Liability Company," "L.L.C," or "LLC.") Delaware Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)

4.		(Unte first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, F.S. to determine)	egistration.)	-		
5.	1761 SW Glade St	(See sections 605.0904 & 605.0905, F.S. to determine)	enalty liability)	_ <u>2</u> 2	2016	医排生乳毒素
	Port Saint Lucie, Pl. 34	1953				er skra
6.	1761 SW Glade St	(Street Address of Principal Office)		- 15 to 15 t	S	il Lana
	Port Saint Lucie, FL 3	1953			ĒĒ	Ω 4 Ω 4 Ω 4,
		(Mailing Address)	1964 - 1965 - 1964 - 1964 - 1964 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 - 1965 -			٠,
7.	Name and street address	is of Florida registered agent: (P.O. Box NOT acceptal	ale)	86 NO 12 NO	<u>α</u>	
	Name:	Matthew Sticker		-		
	Office Address:	1761 SW Glade St				
		Port Saint Lucie	Florida 34953			

Registered agent's acceptance:

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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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 against

Registered agent's signature)

The name, title or capacity and address of the person(s) who has/have authority to manage is/arc: Matthew Sticker, Member, 1761 SW Glade St, Port Saint Lucie, FL 34953

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 eath of the translator must be submitted)

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 5.817.155, F.S.

Matthew Sticker

Typed or printed name of signee

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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MCS WEB DEV IT SOLUTIONS 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-FIFTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MCS WEB DEV IT SOLUTIONS LLC" WAS FORMED ON THE TWELFTH DAY OF JANUARY, A.D. 2016.

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

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SR# 20160380607

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

Jaffery W. Bullinen, Sacretary of Blade

Authentication: 201723230

Date: 01-25-16