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| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | • | X · | * |
|--|---|---|---|
| SUBJECT: MONEY | Y PENNY (Name of L | APUTAL imited Liability Compa | LLC. |
| | | | Transact Business in Florida," Certificate of pility company to transact business in Florida |
| Please return all correspondence con | acerning this matter to the f | ollowing: | |
| | Joyce J. W | Nc Connell me of Person | |
| | MONEY PEA | MY CAPI- | TAL, LLC. |
| | 2184 Nova 1 | Jillage Dr Address | ive |
| | Dauie City/Sta | FL 33 | 3317 |
| | yce mc. mc E-mail address: (to be used | brown a for future annual report | Damail.com |
| For further information concerning t | his matter, please call: | | |
| Joye J Name of C | · McConnell | at (<u>95 4</u>) Area Code | \$ 605-9979 Daytime Telephone Number |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 | | Divis Regis Clifto 2661 | EET ADDRESS: sion of Corporations stration Section on Building Executive Center Circle hassee, FL 32301 |
| | g amount: ☐ \$130.00 Filing Fee & Certificate of Status | □ \$155.00 Filing Fee Certified Copy | & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy |



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 4, 2016

JOYCE J. MCCONNELL 2184 NOVA VILLAGE DRIVE DAVIE, FL 33317

SUBJECT: MONEYPENNY CAPITAL, LLC

Ref. Number: W16000068040

We have received your document for MONEYPENNY CAPITAL, LLC and check(s) totaling \$125.00. However, the enclosed document has not been and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tanisha L Washington Regulatory Specialist II

Letter Number: 416A00021283

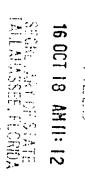
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| IN COMPLANCE 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: |
|--|
| (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 omst include "Limited Liability Company," "L.L.C." or "L.L.C.") 2 |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) |
| s. 8930 W STATE RD 84, #1312 Davie, FL 33324 |
| 6. 2184 Nova Village Dr., Davig FL 33317 25 5 |
| (Mailing Address) |
| 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) |
| Name: Business Filings, Incorporated Office Address: 1200 S. Pine Island Road Office Address: 1200 S. Pine Island Road |
| Office Address: 1200 S. Pine Island Road |
| Flantation, Florida 33324 |
| (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. |
| Brien D. Kladle - Ast. Senitory for Bushest Filings Incorporated (Registered agent's signature) |
| 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: |
| Joyce J. McConnell 2184 Nova Village Dr. Davie, FL 33317 |
| Joyce J. McConnell 2184 Nova Village Dr. Davie, FL 33317 Gary S. McConnell 2184 Nova Village Dr. Davie, FL 33317 |
| Janys. miconnell-manager / dayce). Miconnell-manager |
| 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 |
| 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 falcences any ideal for in a 217 155. E.S. |

Typed or printed name of signee

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, MONEYPENNY CAPITAL, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 30, 2016, and is in good standing in this state.

SEAL OF THE SEAL O

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 16, 2016.

echara K. Cegarste

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160916-1171
You may verify this electronic certificate
online at http://www.nvsos.gov/