## M16000008910

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL.
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	·	of Status
Special Instructions to	Filing Officer:	

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WA HARRIE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 357937 8060509
AUTHORIZATION : Finels of man
COST LIMIT : \$ 130.00
ORDER DATE: November 4, 2016
ORDER TIME : 12:29 PM
ORDER NO. : 357937-005
CUSTOMER NO: 8060509
'
FOREIGN FILINGS
NAME: MGL MF RE HOLDCO, LLC
XXXX QUALIFICATION (TYPE: LL)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY  XX CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Melissa Zender EXT#

EXAMINER:

## 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:

, MGL MF RE HOLDC	O, LLC	DOT PROPERTY.			
		Company; must include "Limited Lia	bility Company," "L.L.	C.," or "LLC.")	
Liability Company," "L.L.C,		for the purpose of transacting business			:d
2. DELAWARE		$_3$ $_{app}$	lied for (FEI number, if app		
(Jurisdiction under the law company is organized)	of which foreign limi	ted liability	(FEI number, if app	licable)	
4					
	(Date first tra (See sections 69	ansacted business in Florida, if prior to 05.0904 & 605.0905, F.S. to determin	o registration.) e penalty liability)		
5. 1401 Brickell Avenue.				***************	
Miami, FL 33131				15	
		eet Address of Principal Office)		查	3.
6. 1401 Brickell Avenue,	Suite 530			i,	
Miami, FL 33131					
		(Mailing Address)			.;;
7 Name and street address	s of Florida registe	red agent: (P.O. Box NOT accept	aplo)	φ 🗦	lg.
	Corporation Serv	•	abici		***
Name:	Corporation Serv	ice Company	-		
Office Address:	1201 Hays Street		<del>-</del>		
	Tallahassee		, Florida 32301 (Zip co		
designated in this applica	gistered agent and tion, I hereby acce ons of all statutes r my position as regi. Corporation Sen	to accept service of process for the pt the appointment as registered a clative to the proper and complete stered agent.  Vice Company	gent and agree to ac	et in this capacity. I further	r agree with ai
	By:	101./m	time		
		(Registered agent's signature)	_	Asst. Vice Preside	ent
8. The name, title or capa	acity and address of	the person(s) who has/have author	rity to manage is/are:		
The Caporal Group LLC,	Manager Managed				
1401 Brickell Avenue, St	iite 530				
Miami, FL 33131					
	of which it is organ	ore than 90 days old, duly authentificate is in a forei			
		Signature of an authorized perso	n	•	
This document is executed submitted in a document to	the Department of	section 605.0203 (1) (b), Florida State constitutes a third degree fel	Statutes. I am aware to ony as provided for it	that any false information n s.817.155, F.S.	
	Ricardo Caporal	7			
		Typed or printed name of signee			

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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MGL MF RE HOLDCO, 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 FOURTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MGL MF RE HOLDCO, LLC" WAS FORMED ON THE SECOND DAY OF NOVEMBER, A.D. 2016.

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

6201778 8300 SR# 20166510719 Authentication: 203285695

Date: 11-04-16