M17000001247

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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D. SCOTT FEB 1 4 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 24, 2017

ROSE GARCIA 1621 CENTRAL AVE CHEYENNE, WY 82001

SUBJECT: MILTON KEYNES CAPITAL, LLC

Ref. Number: W1700006368



We have received your document for MILTON KEYNES CAPITAL, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Can't accept articles of organization.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 617A00001426

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 BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited Liability Company; must include "Limited Liab (If name unavailable, enter alternate name adopted for the purpose of transacting business Liability Company," "L.L.C," or "LLC,")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business	s in Florida. The alternate name must include "Limited
macing company, 1545C, or 155C, j	
2. Wyoming 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4 01/18/2017	
(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	tegistration.) : penalty liability)
5. 1621 Central Ave	
Cheyenne, WY 82001	
(Street Address of Principal Office)	
6. 1621 Central Ave	
Cheyenne, WY 82001	
(Mailing Address)	
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> accepta	able)
Name: Daniel Odongo	-
Office Address: 1474 Winston Road	_
Maitland	_ , Florida
(City) Registered agent's acceptance:	(Zip code)
Having been named as registered agent and to accept service of process for the designated in this application, I hereby accept the appointment as registered as to complywith the provisions of all statutes relative to the proper and complete accept the obligations of my position as refistefed agent. (Registered agent's signature)	gent and agree to act in this capacite. I further agre
8. The name, title or capacity and address of the person(s) who has/have author	rity to manage is/are:
Daniel Odongo, President	
1474 Winston Road	<u> </u>
Maitland, FL 32751	
9. Attached is a certificate of existence, no more than 90 days old, duly authentic jurisdiction under the law of which it is organized. (If the certificate is in a foreign of the translator must be submitted) Signature of an authorized person	gn language, a translation of the certificate under oath
This document is executed in accordance with section 605.0203 (1) (1). Florida 8 submitted in a document to the Department of State constitutes a third degree felo Daniel Odongo Typed or printed name of signee	

STATE OF WYOMING Office of the Secretary of State

1, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Milton Keynes Capital, LLC is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **January 6, 2017**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000738063**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 8th day of February, 2017 at 1:17 PM. This certificate is assigned 022160216.



Secretary of State

TEB 13 MIN: 01
SECRETARY OF STATE
SECRETARY OF STATE

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.