## MM00002313

(Re	equestor's Name)			
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7 MAR 20 M 8 24

SECRETARY OF STATE
AHASSEE, FLORIDA

DEPARTMENT OF STATE

D. SCOTT MAR 2 1 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : (562116 4303929

AUTHORIZATION : /

COST LIMIT : \$ 155.00

ORDER DATE: March 20, 2017

ORDER TIME : 3:36 PM

ORDER NO. : 562116-005

CUSTOMER NO: 4303929

## FOREIGN FILINGS

NAME: VENTURE.CITY MIAMI ACCELERATOR, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

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

IN COMPILANCE 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:

venture.city Miami Accelerator, LLC

1. Venture.city Miami Ac	celerator, LLC eign Limited Liability Company; must include "Lin	nited Liability Company," "L.L.C.," o	r"LLC.")
	Iternate name adopted for the purpose of transacting	business in Florida. The alternate na	me must include "Limited
Liability Company," "L.L.C.	," or "LLC.")		
2. DELAWARE	of which foreign limited liability	(FEI number, if applicable	3
company is organized)	of which foreign fimilied lighting	(FE) number, it applicable	;)
4. UPON FILING			
	(Date first transacted business in Florida, i (See sections 605.0904 & 605.0905, F.S. to t	f prior to registration.) letermine penalty liability)	<del>_</del>
5.			_
365 Hampton Lane, Key Biscayne, Florida 33149			7 SEC 7
(Street Address of Principal Office)			三 記書 至 刊
6			三型2
			YAR OM
	(Mailing Address)		
7. Name and street address	ss of Florida registered agent: (P.O. Box NO)	acceptable)	5 <b>0</b>
Name:	CORPORATION SERVICE COMPANY		24 103, 175
Office Address;	1201 HAYS STREET		
	TALLAHASSEE	, Florida 32301 (Zip code)	
	(City)	(Zip code)	<del></del>
designated in this applicate to complywith the provisi	egistered agent and to accept service of procestion, I hereby accept the appointment as regions of all statutes relative to the proper and comy position as registered agent.	stered agent and agree to act in the complete performance of my dutient Melis  Acet Vi	is capacity. I further agree
	(Registered agent's si	gnature)	ov i robidom
8. The name, title or capa	acity and address of the person(s) who has/have	e authority to manage is/are:	
LAURA GONZALEZ-ES	STEFANI - 365 Hampton Lane, Key Biscayne	, Florida 33149 - Member	
	569 N. Bayhomed Dr., Miami, Florida 33133 -		
		A A Company Co	<u></u>
	of existence, no more than 90 days old, duly a of which it is organized. (If the certificate is in ubmitted)  (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	a foreign language, a translation of	
	d in accordance with section 605.0203 (1) (b), I to the Department of State constitutes a third dep		

LAURA GONZALEZ-ESTEFANI

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 "VENTURE.CITY MIAMI ACCELERATOR, 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 TWENTIETH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VENTURE.CITY MIAMI ACCELERATOR, LLC" WAS FORMED ON THE TENTH DAY OF MARCH, A.D. 2017.

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

17 MAR 20 M 8 24
SECRETARY OF STATE
SECRETARY OF STATE
AND AHASSEE, FLORIDA

6343373 8300

SR# 20171865972

Authentication: 202227440

Date: 03-20-17

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