## 11/7000004210

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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2017 MAY 17 AM 8: 25
SECRETARY OF STATE
AND ANASSEE. FLORIDI

2017 NAY 17 AM 11: 12

K. SALY MAY 18 2017

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

ACCOUNT NO. : 12000000195						
REFERENCE : 643411 7833946						
AUTHORIZATION: Spell Blesson						
COST LIMIT : \$ 125.00						
ORDER DATE: May 16, 2017						
ORDER TIME : 9:02 AM						
ORDER NO. : 643411-005						
CUSTOMER NO: 7833946						
FOREIGN FILINGS						
NAME: M-1395 BRICKELL AM, LLC						
XXXX QUALIFICATION (TYPE: <u>LL</u> )						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY  XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						

EXAMINER:

CONTACT PERSON: Melissa Zender -- EXT#

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

M- SUBJECT:	-1395 Brickell AM	И, LLC				
SOBSECT	Name of Limited Liability Company					
				Transact Business in Florida," Certificate of ility company to transact business in Florida.		
Please return all	correspondence o	concerning this matter to the	following:			
	Camilo Miguel	, Jr.				
	Name of Person					
	MC Manager, LLC					
	Firm/Company					
	119 Washington Ave, Ste. 505					
	Address					
	Miami Beach, FL 33139					
		City/S	tate and Zip Code			
	cmigueljr@yaho					
		E-mail address: (to be used	for future annual report	notification)		
For further infor	mation concernin	g this matter, please call:				
Camilo	o Miguel, Jr.		305 531	-2426		
	Name o	of Contact Person	Area Code	Daytime Telephone Number		
Divisio Registr P.O. B	ING ADDRESS: on of Corporations ration Section ox 6327 assee, FL 32314		Divis Regis Clifto 2661	EET ADDRESS: ion of Corporations stration Section on Building Executive Center Circle hassee, FL 32301		
	eck for the follow 5.00 Filing Fee	ring amount:  \$\Bigsize \text{\$\text{\$\sigma}\$} \text{\$130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Filing Fee Certified Copy	& \$\Bigcup \$160.00 Filing Fee, Certificate of Status & Certified Copy		

## 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:

1. M-1395 Brickell AM, I			
(Name of Fore	eign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "l	LLC.")
Liability Company," "L.L.C,"		sacting business in Florida. The alternate name	must include "Limited
2. Delaware	3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4.			
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F.	rida, if prior to registration.) S. to determine penalty liability)	
5. 119 Washington Aven	ue, Suite 505	*****	7 A SI
Miami Beach, FL 3313	39	·	2011 MAY 17 SEURETASS
	(Street Address of Principal	Office)	THE T
6. 119 Washington Avenu	ue, Suite 505		SSER I
Miami Beach, FL 331.	39		1 M 8: 25 SEE. FLORID
	(Mailing Address)		[0] <b>33</b>
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	RIDIE RIDIE
Name:	Corporation Service Company		*
Office Address:	1201 Hays Street		
	Tallahassee	Florida 32301	
	(City)	, Florida 32301 (7.ip code)	
designated in this applica to complywith the provisi	gistered agent and to accept service of p tion, I hereby accept the appointment a	process for the above stated limited liability is registered agent and agree to act in this and complete performance of my duties,  Lydia Cohen Asst: Vice President	capacity. I further agree
	(Registered age	nt's signature)	
•	acity and address of the person(s) who ha	s/have authority to manage is/are:	<del></del>
119 Washington Avenue,	Suite 505		
Miami Beach, FL 33139			No. of the last of
	of which it is organized. (If the certificat	duly authenticated by the official having c e is in a foreign language, a translation of	
	Signature of an au	nthorized person	
This document is assessed	d in accordance with anyther COS 0202 (1)	(h) Florido Statutos I	Calaa in Cammati
		) (b), Florida Statutes. I am aware that any ird degree felony as provided for in s.817.	

Typed or printed name of signee

Camilo Miguel, Jr., CEO

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "M-1395 BRICKELL AM, 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 SIXTEENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "M-1395 BRICKELL AM, LLC" WAS FORMED ON THE FIRST DAY OF MAY, A.D. 2017.

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

FILE U



Authentication: 202548955

Date: 05-16-17