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Office Use Only



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SULKER



December 13, 2017

BORBALA BANTO 8221 BRECKSVILLE RD STE 205 BRECKSVILLE, OH 44141

SUBJECT: LATINEX INTERNATIONAL LTD

Ref. Number: W17000098668

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

The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." Please add the appropriate designation to the name of your limited liability company or to the alternate name you have selected for the state of Florida, if your name is unavailable in this state. The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer 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.

Letter Number: 417A00025232

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

- COVER LETTER

TO:

Registration Section Division of Corporations

| | Name of | Limited Liability Company | - |
|--|---|---|--|
| | | | ansact Business in Florida," Certificate of company to transact business in Florid |
| Please return all correspondence o | oncerning this matter to the | following: | |
| | Bor | bala Banto | |
| - | N | ame of Person | |
| | | erge CPAs INC | |
| | F | ігт/Сопіралу | |
| | 8221 Brecksvi | lle Road, Suite 2 | 05 |
| | | Address | |
| | | le, Ohio 44141 | |
| | City/S | tate and Zip Code | |
| | borbala@cond E-mail address: (to be used | ciergecpas.com d for future annual report no | tification) |
| For further information concerning | g this matter, please call: | | |
| Borb | ala Banto | at (216) | 333-3413 |
| Name o | f Contact Person | Area Code Day | vtime Telephone Number |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 | | Division Registrat Clifton E 2661 Exc | of Corporations tion Section Building ecutive Center Circle see, FL 32301 |
| Enclosed is a check for the follow ☑ \$125,00 Filing Fee | ing amount: S130,00 Filing Fee & Certificate of Status | ☐ \$155.00 Filing Fee & Certified Copy | ☐ \$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:

| me unavailable, enter alternate r | ame adopted for the purpose of transacting business in | Florida. The alt | ernate name must include "Limited Lia | hility Company," "L.L.C," o | or "LLC." |
|--|--|---|---|--|------------------|
| Ohio | high foreign limited liability company is organized) | 3. | 41-2173988 | ber, if applicable) | |
| (Jurisdiction tinger the law of w | nich foreign immed ilability company is organized) | | (FEL REM | oer, it applicable? | |
| | (Data tient many acta t business on blomby of and | s to search the | | <u></u> | |
| | (Date first transacted business in Florida, if prio (See sections 605,0904 & 605,0905, F.S. to det | ermine penulty l | ability) | | |
| Iuri De Bruns (Street Address of | Guenther Buhr | 6. | Concierge CPAs I | | |
| 7434 Gary Ave | • | | (Mailing Add 8221 Brecksville | | 205 |
| | Florida 33141 | - | Brecksville, Oh | io 44141 | |
| Trading Dodon, | 1101.44 331.1 | - | | <u> </u> | |
| Name and street addres | ss of Florida registered agent: (P.O. B | Box NOT a | eceptable) | | |
| | Iuri De Bruns Guenthe | | , | | |
| Name: | Tall be blans Guenene | I Duni | | | |
| | 7434 Gary Avenue | | | | |
| Office Address: | - 7134 Cary Avenue | | | | |
| Office Address: | Miami Beach | | | | |
| egistered agent's acceptiving been named as resignated in this application of the provision | Miami Beach (City) stance: egistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the prof | it as registe | (Zip cod For the above stated limited red agent and agree to act | l liability company in this sapacity | furthe |
| egistered agent's accep aving been named as re signated in this applica comply with the provis ad accept the obligation | Miami Beach (City) Itance: Tegistered agent and to accept service of the appointment ons of all statutes relative to the property of my position as registered agent. | nt as registe per and con | (Zip cod for the above stated limited red agent and agree to act aplete performance of my | l liability company in this sapacity | furthe |
| egistered agent's accepaving been named as resignated in this application comply with the provisid accept the obligation. | Miami Beach (City) Interest agent and to accept service of the appointment of all statutes relative to the proposition as registered agent. Arrivered specific part of the person(s) who | nt's signature) | or the above stated limited red agent and agree to act applete performance of my uthority to manage is/are: | liability compation this capacity duties, and I am fa | furthe miliar |
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ture of an authorized person

Iuri De Bruns Guenther Buhr

[yped or printed name of signee]

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show LATINEX INTERNATIONAL LTD, an Ohio Limited Liability Company, Registration Number 1534302, was organized within the State of Ohio on April 18, 2005, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 5th day of December, A.D. 2017.

Ohio Secretary of State

for Hastel

Validation Number: 201733901742