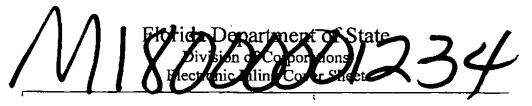
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(((H18000042823 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007

Fax Number

: (702)866-2500 : (702)856-2689

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address: managedreports @ incorp. Com

Foreign Limited Liability Company Melograno Group, LLC

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## **COVER LETTER**

ί.

SUBJECT:	Melo	ograno Group, LLC			
SUBJECT: _	Name of Limited Liability Company				
	Application by Foreign Limited Liability Concerns are submitted to register the above references				
Please return a	ill correspondence concerning this matter to the	e following:			
	Janice Null				
	·	lame of Person			
	InCorp Services, Inc.				
	F	firm/Company	<del></del>		
	3773 Howard Hughes Parkway Sui	te 500S			
		Address			
	Las Vcgas, NV 89169-6014				
	City/S	State and Zip Co-le			
	managedreports@incorp.com				
	•	ed for future annual report no	tification)		
For further inf	ormation concerning this matter, please call:				
Jani ———	ce Null for InCorp Services, Inc.	at ()	677 ext. 6902		
	Name of Contact Person	Area Code Day	time Telephone Number		
	LING ADDRESS: ion of Corporations		<u>CADDRESS:</u> of Corporations		
Registration Section		Registrat	ion Section		
	Box 6327 nassee, FL 32314	Clifton E	Puilding ecutive Center Circle		
	THE CONTRACT OF THE CONTRACT O		see, FL 32301		
	heck for the following amount: 25.00 Filing Fee  \$130.00 Filing Fee &	■ \$155.00 Filing Fee &	□ \$160.00 Filing Fee, Certificate		
<b></b>	Certificate of Status	Certified Copy	of Status & Certified Copy		

2f. .

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## 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. Melograno Group, (Name of Foreign Li	mited Liability Company; must include "Limited Li	ability Company, L.L.C. or LLC.	
iff name maynilable, enter akemate nam	e adopted for the purpose of transacting business in Florida	The alternate name must include "Limited Liabil	ity Company, "LLC," or "LLC")
2 Delaware		3 81-3734046	
(Jurisdiction under the law in which foreign limited liability company is organized)		4FEI number	r. if applicable)
4. March 1, 2017			
	(Date first transacted business in Florida, if prior to regi- (See sections 605 0904 & 605 (905, F.S. to determine)	stration ) senalty liability )	
5. 8805 Tamiami Tra		6. 8805 Tamiami Trail #	
Naples. FL 34/0	•	Naples, FL 34108	"" <u>*</u>
	<u> </u>		-61
<del>- 112</del>	- <del> </del>	<del></del>	ं ।
7. Name and street address	of Florida registered agent: (P.O. Box N	I <u>OT</u> acceptable)	in the second
Name:	InCorp Services, Inc.		. 37
0.77	17888 67th Court North	<del></del>	
Office Address:			
	Loxahatchee	. Florida 33470	<del></del>
8. The name, title or capacity:	Reputed agent's sip		Name and Address:
Managing Member			
	8805 Tamiami Trail #236 Naples, FL 34108		
(Use attachments if necess	ary)		
	of existence, no more than 90 days old, du if which it is organized. (If the certificate i bmitted)		
	ted in accordance with section 605.0203 ( the Department of State constitutes a third	d degree felony as provided for in s	
	( ) Segment of	an authorized person	
	Maria	E. Santiago	
	Typed or no	anted name of strings	<del></del>

12:20:37 p.m. 02-05-2018 4/4

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## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MELOGRANO GROUP, 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 SECOND DAY OF FEBRUARY, A.D. 2016:

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MELOGRANO GROUP, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF AUGUST, A.D. 2016.

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

6136841 8300 SR# 20180701273

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

Jaffery H. Salvert, Sucretary of State

Authentication: 202085968

Date: 02-02-18

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