M18000004891

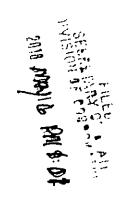
MAI Bui		
- 1650 AL	-	
- MIAMI'S	CAH, FL	33139
	,	
(Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
į	W18-311	034
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
j		
	Office Use Only	



400306745074

M18-4891

03/26/18--01034--003 **155.00



N. CAUSSEAUX MAY 2 2 2018

M18-4891



April 23, 2018

MAI BUI MAI EQUITY, LLC 1650 ALTON ROAD MIAMI BEACH, FL 33139

SUBJECT: MAI EQUITY, LLC Ref. Number: W18000031034

We have received your document for MAI EQUITY, LLC and your check(s) totaling \$155.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

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.

Nanette Causseaux Regulatory Specialist II Supervisor

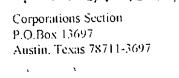
www.sunbiz.org

Letter Number: 918A00008207

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

IN COMPLIANCE WITH SECTION 605-6002, FLORIDA STATUTEX THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	сыниса павину С	ompany, must include "Lin	писи главшиў С	ompany. 1.1.X. Of the	. 1	
It name unavailable, enter alternate n	same adopted for the pu	irpose of transacting business in	Florida The altern	are name must include "Limited	Liability Company	.,""I, L C," or "LI C ")
TEXAS	<u></u> .		3. <u>8</u>	2-3735746		
(Jurisdiction under the law of w	hich foreign limited hal	bility company is organized)		(1 EU)	number, if applicabl	le)
1. <u>3/15/2018</u>						
	(Date first transa (See sections 60	acted business in Florida, if prio 05 0904 & 605 0905, F.S. to dei	or to registration 1 termine penalty hab	ıluşı		
3622 THUNDER DR	IVE		6. S	AME		
SACHSE, TX 75048	Principal Office)		_	(Mailing	Address	
3ACH3E, 1X 73046						
			_			
	6.00					ZI VISE
7. Name and street addres	ss of Florida reg	ustered agent: (P.O. B	Box <u>NOT</u> ace	eptable)		
Name:	MAI BUI			_		
Office Address:	1650 ALTON	I RD				- T
Wille Haditas	MIAMIDEAC	רו בו		22120		जी । 100 क
	MIAMI BEAC	City)		Florida <u>33139</u>	code)	⋾
Registered agent's accep	stuncar	11.11.7		(.
Paving been named as re lesignated in this applica o comply with the provisi	egistered agent of tion, I hereby a ions of all statu	eccept the appointment tes relative to the prop	it as registere per and comp	d agent and agree to	act in this cap	pacity. I further a
Paving been named as re lesignated in this applica o comply with the provisi	egistered agent of tion, I hereby a ions of all statu	eccept the appointment tes relative to the prop	it as registere per and comp	d agent and agree to	act in this cap	pacity. I further a
Paving been named as re lesignated in this applica o comply with the provisi	egistered agent of tion, I hereby a ions of all statu	eccept the appointment tes relative to the prop	nt as registere per and comp	d agent and agree to	act in this cap	pacity. I further a
Taving been named as re lesignated in this applica o comply with the provisi and accept the obligation.	egistered agent of tion, I hereby a tions of all statu s of my position	tes relative to the proj tes relative to the proj t-us registered agent. (Registered agen	nt as registere per and comp	d agent and agree to dete performance of r	act in this cap ny duties, an	pacity. I further a
Having been named as re lesignated in this applica to comply with the provisi and accept the obligation.	egistered agent of tion, I hereby a tions of all status of my position	tes relative to the proj tes relative to the proj t-us registered agent. (Registered agen	nt as registere per and comp of sugnature) has/have aut	d agent and agree to dete performance of r	act in this cap ny duties, and 	pacity. I further a
Having been named as redesignated in this applicate to comply with the provisiond accept the obligation. 8. The name, title or capa	egistered agent of tion, I hereby a tions of all status of my position	(Registered agent)	nt as registere per and comp of sugnature) has/have aut	d agent and agree to olete performance of r	act in this cap ny duties, and 	pacity. I further a d I am familiar wi
Having been named as relesignated in this applicate comply with the provisiond accept the obligation. 8. The name, title or capa Title or Capacity:	egistered agent of tion, I hereby a tions of all status of my position acity and address Man MAI 1650 A	(Registered agent) (Registered agent) (Registered agent) (See of the person(s) who he and Address; BUI LION RD	nt as registere per and comp of Sugnature) has/have aut	d agent and agree to olete performance of r	act in this cap ny duties, and 	pacity. I further a d I am familiar wi
Having been named as relesignated in this applicate comply with the provisiond accept the obligation. 8. The name, title or capa Title or Capacity:	egistered agent of tion, I hereby a tions of all status of my position acity and address Man MAI 1650 A	(Registered agent) (Registered agent) (Registered agent) (See of the person(s) who he and Address;	nt as registere per and comp of Sugnature) has/have aut	d agent and agree to olete performance of r	act in this cap ny duties, and 	pacity. I further a d I am familiar wi
Having been named as relesignated in this applicate comply with the provisiond accept the obligation. 8. The name, title or capa Title or Capacity:	egistered agent of tion, I hereby a tions of all status of my position acity and address Man MAI 1650 A	(Registered agent) (Registered agent) (Registered agent) (See of the person(s) who he and Address; BUI LION RD	nt as registere per and comp of Sugnature) has/have aut	d agent and agree to olete performance of r	act in this cap ny duties, and 	pacity. I further a d I am familiar wi
Having been named as redesignated in this applicate comply with the provisiond accept the obligation. 8. The name, title or capa Title or Capacity:	egistered agent of tion, I hereby a tions of all status of my position acity and address Man MAI 1650 A	(Registered agent) (Registered agent) (Registered agent) (See of the person(s) who he and Address; BUI LION RD	nt as registere per and comp of Sugnature) has/have aut	d agent and agree to olete performance of r	act in this cap ny duties, and 	pacity. I further a d I am familiar wi
Having been named as relesignated in this applicate comply with the provisiond accept the obligation. 8. The name, title or capa Title or Capacity:	egistered agent of tion, I hereby a tions of all status of my position acity and address Man MAI 1650 A	(Registered agent) (Registered agent) (Registered agent) (See of the person(s) who he and Address; BUI LION RD	nt as registere per and comp of Sugnature) has/have aut	d agent and agree to olete performance of r	act in this cap ny duties, and 	pacity. I further a d I am familiar wi
Having been named as relesignated in this applicate ocomply with the provisional accept the obligation. 8. The name, title or capa Title or Capacity: PRESIDENT	egistered agent of tion. I hereby a fons of all status of my position acity and address Nam MAI 1650 A MIAMI	(Registered agent) (Registered agent) (Registered agent) (See of the person(s) who he and Address; BUI LION RD	nt as registere per and comp of Sugnature) has/have aut	d agent and agree to olete performance of r	act in this cap ny duties, and 	pacity. I further a d I am familiar wi
Having been named as relesignated in this applicate ocomply with the provisional accept the obligation. 8. The name, title or capa Title or Capacity: PRESIDENT	egistered agent of tion. I hereby a fons of all status of my position acity and address Nam MAI 1650 A MIAMI ((Registered agent)	nt as registere per and comp nt's signature) has/have aut Title	d agent and agree to plete performance of t hority to manage is/ar or Capacity:	act in this cap ny duties, and e: Name a	pacity. I further ad I am familiar wi
Having been named as relesignated in this applica o comply with the provisional accept the obligation. 8. The name, title or capa Title or Capacity: PRESIDENT (Use attachments if neces) O. Attached is a certificate urisdiction under the law	egistered agent of tion. I hereby a fons of all status of my position acity and address Nam MAI 1650 A MIAMI () of existence, no of which it is or	(Registered agent) (Registered a	nt as registere per and comp nt's signature) has/have aut Title	d agent and agree to olete performance of the performance of the last of the l	e: Name :	pacity. I further a d I am familiar wi and Address:
Having been named as redesignated in this applicate to comply with the provise and accept the obligation. 8. The name, title or capa Title or Capacity: PRESIDENT (Use attachments if neces). Attached is a certificate urisdiction under the law of the translator must be so	egistered agent of tion. I hereby a fons of all status of my position acity and address Nam MAI 1650 A MIAMI (1997) of existence, no of which it is or ubmitted)	(Registered agent) (Registered a	of v signature) of has/have aut Title	nd agent and agree to olete performance of the performance of the olete	e: Name a	nacity. I further a d I am familiar wi and Address:
Having been named as redesignated in this applicate to comply with the provise and accept the obligation. 8. The name, title or capatile or Capacity: PRESIDENT (Use attachments if neces or the translator must be seen to the translator must be see	egistered agent of the property of existence, no of which it is or ubmitted)	(Registered agent) (Registered a	of v signature) of has/have aut Title ld, duly authe cate is in a fo	d agent and agree to olete performance of the performance of the olete	e: Name:	nacity. I further a d I am familiar wi and Address: ody of records in the certificate under of false information
Having been named as redesignated in this applicate to comply with the provisional accept the obligation. 8. The name, title or capa Title or Capacity:	egistered agent of the property of existence, no of which it is or ubmitted)	(Registered agent) (Registered a	of v signature) of has/have aut Title ld, duly authe cate is in a fo	d agent and agree to olete performance of the performance of the olete	e: Name:	nacity. I further a d I am familiar wi and Address: ody of records in the certificate under of false information





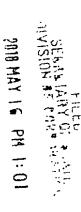
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for MAI EQUITY, LLC (file number 802805983), a Domestic Limited Liability Company (LLC), was filed in this office on September 04, 2017.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: September 05, 2017



In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 08, 2018.



Phone: (512) 463-5555

Prepared by: SOS-WEB



Rolando B. Pablos Secretary of State

Dial: 7-1-1 for Relay Services

Document: 811890580002

Come visit us on the internet at http://www.sos.state.tx.us/ Fax: (512) 463-5709