## M1800009831

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



10/22/18--01033--008 \*\*125.00



**FILED** 2018 OCT 22 AM II: 21 SECULIANAS SEE, FL

Office Use Only

## COVER LETTER

## TO: Registration Section Division of Corporations

VISA GLOBAL, LLC

SUBJECT: \_

×.

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SANDRA R. CALDERARO

Name of Person

CALDERARO TYRRELL LAW GROUP

Firm/Company

6301 NW 5th WAY, SUITE 2000

Address

FORT LAUDERDALE

City/State and Zip Code

CBUSTAMANTE@VISAMIAMI.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CLAUDIA BUSTAMANTE 954 376-6161 \_\_\_ at (\_\_\_\_\_ Area Code Name of Contact Person Daytime Telephone Number MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations Registration Section Registration Section P.O. Box 6327 **Clifton Building** Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

■ \$125.00 Filing Fee □ \$130.00 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

VISA GLOBAL, LLC	Lowing Link line Conservation of the hole of the	ited Liability Company," "L.L.C.," or "LLC.") 52 Conf. 14. 14 UF 54
(Name of Poreign	Canned Liaomry Company, most metode 17.00	TALAAHASSEE.F
ane unavailable, enter alternate r	tanie adopted for the purpose of transacting business in h	lorida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")
Delaware		3. <u>82-1241467</u> (FEI number, if applicable)
(Jurisdiction under the law at w	hich foreign limited liability company is organized)	(FU number, il'applicable)
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605.0905, F.S. to deter	to registration.) mine penalty bability)
6301 NW 5th Way, Suite 2000 (Street Address of Principal Office)		6. 6301 NW 5th Way, Suite 2000 (Mading Address)
(Street Address of Principal Office) Fort Lauderdale, FL 33309		(Mailing Address) Fort Lauderdale, FL 33309
		Tort Lauderdale, FL 55509
Num and more added		
Name and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Bo Sandra R. Calderaro	ox <u>NOT</u> acceptable)
		x <u>NOT</u> acceptable)
Name:	Sandra R. Calderaro	
Name: Office Address:	Sandra R. Calderaro 6301 NW 5th Way, Suite 2000 Fort Landerdale (Cay)	
Name: Office Address: egistered agent's accep aving been named as re- signated in this applica comply with the provisi	Sandra R. Calderaro 6301 NW 5th Way, Suite 2000 Fort Lauderdale (Cay) stance: egistered agent and to accept service of tion, I hereby accept the appointment	
Name: Office Address: egistered agent's accep aving been named as re- signated in this applica- comply with the provisi	Sandra R. Calderaro 6301 NW 5th Way, Suite 2000 Fort Lauderdale (Coy) stance: gistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the prope	, Florida <u>33309</u> (Zip code) f process for the above stated limited liability company at the p as registered agent and agree to act in this capacity. I further

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
AMBR	Sandra Calderaro		
	.6301_NW_5th_Way -Suite-2000		
	.Fort-Lauderdale .FL33309		

(Use attachments if necessary)

, s.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (4) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

	_
Sandra Penata Calderaro (Oct 19, 2018)	

Signature of an authorized person

Sandra R. Calderaro

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VISA GLOBAL, 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 FOURTH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VISA GLOBAL, 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.



6137096 8300

SR# 20186980599 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203548124 Date: 10-04-18