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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : VIP ACCOUNTING & BUSINESS CONSULTING , LLC
Account Number : I20100000072
Phone : (954)228-2410
Fax Number : (954)228-2411

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

Email Address: Vitor.Bidart@VipBusiness.Com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company

MUXIPAY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	**$125.00**

2018 DEC 13 PM 12:45

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MUXIPAY, LLC
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:

VITOR BIDART
Name of Person

VIP BUSINESS CONSULTING LLC
Firm/Company

6499 POWERLINE RD STE 101
Address

FORT LAUDERDALE, FL 33309
City/State and Zip Code

Vitor.Bidart@VipBusiness.Com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vitor Bidart at (954) 228-2410
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
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

* See Fax Coversheet Payment

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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. MUXIPAY, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")

2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-2611623
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 6499 POWERLINE RD STE 101
(Street Address of Principal Office)

FORT LAUDERDALE

FLORIDA 33309

6. SAME
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name VIP BUSINESS CONSULTING LLC

Office Address: 6499 POWERLINE RD STE 101

FORT LAUDERDALE (City), Florida 33309 (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

- VITOR BIDART
(Registered agent's signature)

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5 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:
MANAGER	PAULO GUZZO NETO 6499 POWERLINE RD STE 101 FORT LAUDERDALE, FL 33309

(Use attachments if necessary)

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 (1) (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.

Signature of an authorized person

PAULO GUZZO NETO

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MUXIPAY, 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 TENTH DAY OF DECEMBER, A.D. 2018.

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SECRETARY OF STATE

TALLAHASSEE, FLORIDA

Jeffrey W. Bullock, Secretary of State

6526665 8300

SR# 20187658923

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

Authentication: 204059018

Date: 12-10-18