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SECRETARY OF STATE
FALLAHASSI FOR STATE

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COVER LETTER

TO:

Registration Section Division of Corporations

MITECH INTEGRATION, 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:

Brando	on Demeter			
	N	ame of Person		
MITEC	H INTEGRA	TION, LL	С	
	P	rm/Company		
835 M	ontego Bay D	r So.		
		Address		
Merritt	Island, FI 32	953		
	City/8	tate and Zip Code		
raisinb7	′2@gmail.coi	n		
	E-mail address: (to be use	d for future annual r	eport not	ification)
For further information concerning	ng this matter, please call:			
Brandon D	emeter	_at (<u>321</u>)	323	3-4465
Name	of Contact Person	Area Code	Day	time Telephone Number
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314] } (Division o Registrati Ulifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ec, FL 32301
Enclosed is a check for the follow ■ \$125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee &	□ \$155.00 Filing	Van Pr	□ \$160.00 Filing Fee, Certificate
er \$125,00 i milg rec	Certificate of Status	Certified Copy	i ce ac	of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

16					
i name unavaname, enter atternate n	ame adopted for the purpose of transacting business in Fl	Florida: The alternate name must include "Einrited Liability Company," "L.L.C," or "L.L.C.")			
Nevada		3			
(Jurisdiction under the law of w	hich foreign limited hability company is organized)	(FEI number, if applicable)			
4					
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	to registration.) rmine penalty listellity)			
835 Montego Bay	Dr So.	6. 835 Montego Bay Dr So. (Mailing Address)			
(Street Address of Principal Office) Merritt Island, FI 32953					
Memit Island, Fr	52933	Merritt Island, FI 32953			
7. Name and street address	ss of Florida registered agent: (P.O. Bo	ox NOT acceptable)			
Name:	Registered Agents Inc.	 			
Office Address:	3030 N. Rocky Point Dr. STE	E 150A			
	Tampa	Florida 33607			
	(C'ny)	(Zip code)			
	Beet Harman (Registered agent)	's signature)			
O (1)	(Registered agent)				
8. The name, title or capa <u>Title or Capacity:</u>					
	(Registered agent) acity and address of the person(s) who h	has/have authority to manage is/are:			
Title or Capacity:	(Registered agent) acity and address of the person(s) who h Name and Address: Brandon Demeter 835 Montago Bay Or So.	has/have authority to manage is/are:			
Title or Capacity:	(Registered agent) acity and address of the person(s) who h Name and Address: Brandon Demeter	has/have authority to manage is/are:			
Title or Capacity:	(Registered agent) acity and address of the person(s) who h Name and Address: Brandon Demeter 835 Montago Bay Or So.	has/have authority to manage is/are:			
Title or Capacity: Manager	(Registered agent's acity and address of the person(s) who have and Address: Brandon Demeter 835 Montago Bay Dr So. Morriti Istand, Fl 32953	has/have authority to manage is/are:			
Title or Capacity: Manager (Use attachments if necess of the Attached is a certificate furisdiction under the law	(Registered agent's acity and address of the person(s) who have and Address: Brandon Demeter 835 Montago Bay Dr So. Merril Island, Fl 32953 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical	has/have authority to manage is/are:			
Title or Capacity: Manager (Use attachments if neces). Attached is a certificate jurisdiction under the law of the translator must be started. This document is executed.	(Registered agent's acity and address of the person(s) who have and Address: Brandon Demeter 835 Montago Bay Dr So. Merriti Island, Fl 32953 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) uted in accordance with section 605,020	has/have authority to manage is/are: Title or Capacity: Name and Address: Little or Capacity: Name and Address:			
Title or Capacity: Manager (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law of the translator must be started. This document is executed.	(Registered agent's acity and address of the person(s) who have and Address: Brandon Demeter 835 Montago Bay Or So. Merriti Island, Fl 32953 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) uted in accordance with section 605.020 of the Department of State constitutes a H	has/have authority to manage is/are: Title or Capacity: Name and Address:			
Title or Capacity: Manager (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law of the translator must be started. This document is executed.	(Registered agent's acity and address of the person(s) who have and Address: Brandon Demeter 835 Montago Bay Dr So. Morrid Island, Fl 32953 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) uted in accordance with section 605.020 of the Department of State constitutes a fl	I. duly authenticated by the official having custody of records in that is in a foreign language, a translation of the certificate under on third degree felony as provided for in s.817.155, F.S.			
Title or Capacity: Manager (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law of the translator must be started. This document is executed.	(Registered agent's acity and address of the person(s) who hame and Address: Brandon Demeter 835 Montago Bay Dr So. Morril Istand, Fl 32953 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) uted in accordance with section 605.020 of the Department of State constitutes a the Signature. Brandon Demeter	I. duly authenticated by the official having custody of records in that is in a foreign language, a translation of the certificate under on third degree felony as provided for in s.817.155, F.S.			

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, MITECH INTEGRATION, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 6, 2018, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 13, 2018.

Barbara K. Cegavske
Secretary of State

Electronic Certificate Certificate Number: C20181213-1155