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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 201790 8301387

AUTHORIZATION :

COST LIMIT : (\$'\\30.00

ORDER DATE: March 4, 2020

ORDER TIME : 11:42 AM

ORDER NO. : 201790-005

CUSTOMER NO: 8301387

FOREIGN FILINGS

NAME: ML RESORT PARCEL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY

XX PLAIN STAMPED COPY

XX ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

⋽

COVER LETTER

, .

TO:	Registration Section Division of Corporations					
SHRH	ML Resor	t Parcel, LLC				
SUBJECT:Name of Limited Liability Company						
The en	closed "Application by Foreign Limitence, and check are submitted to registe	ed Liability Company for Authorization to Transact Business in Florida t the above referenced foreign limited liability company to transact bus	a," Certificate o siness in Florid			
Please	return all correspondence concerning	this matter to the following:				
	Sergio Moises					
Name of Person						
ML Resort Parcel, LLC						
Firm/Company						
	1010 N.E. 2 Avo	enue				
Address						
	Miami, FL 33132					
	City/State and Zip Code					
	kay@rpcholdi	ngs.com				
	E-mail ad	dress: (to be used for future annual report notification)	-			
For tur	ther information concerning this matte	er, please call:	r~3			
Kay Lilly		954 240-9219 at ()	2020 H*			
	Name of Contact Po		; I			
	Mailing Address:	Street Address:	<u> </u>			
Registration Section Division of Corporations		Registration Section	11.74 11.74 11.74			
		Division of Corporations	<u>:</u>			
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	<u>ন</u>			
	☐ \$125.00 Filing Fee					

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: ML Resort Parcel, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") off 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 "L.L.C," or "L.L.C," (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1010 N.E. 2nd Avenue 1010 N.E. 2nd Avenue (Street Address of Principal Office) (Mailing Address) Mianii Miami FL 33132 FL 33132 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Sergio Moises Name: 1010 N.E. 2 Avenue Office Address: Miami 33132 (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.

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:		Name and Address:
□Manager	Name: Sergio Moises	□Manager	Name:	Daniel Kodsi
□Member	Address:	□Member		1010 N.E. 2 Avenue
■ Authorized	Miami, FL	□Authorized		Miami, FL
Person	33132	Person		33132
□Other	Other	■OtherManaging	y Meml	Other
□Manager	Name:Steven Goldfarb	□Manager	Name:	
□Member	Address:1010 N.E. 2 Avenue	□Member	Address: _	
□Authorized	Miami, FL	□Authorized		
Person	33132	Person		
■Other Managing	Memb Other	□Other		Other
□Manager	Name:	□Manager	Name:	2926 H
□Member	Address:	□Member	Address:	· · · · · · · · · · · · · · · · ·
□Authorized		□Authorized		on E
Person		Person		5 . 7
□Other	Other	□Other		Other 5
indexed individuals 9. Attached is a cert jurisdiction under th of the translator mus 10. This document i	(se an attachment to report more than six (6), may be added to the index when filing your lificate of existence, no more than 90 days old law of which it is organized. (If the certificate be submitted) (is executed in accordance with section 605 02 ment to the Department of State constitutes a	Florida Department of Stat I Aily authenticated by the atc is in a foreign language 203 (1) (b), Florida Statutes	e Annual Re official hav , a translation. , I am aware	eport form. ving custody of records in the on of the certificate under oath that any false information

Signature of an authorized person

Typed or printed name of signee

Sergio Moise

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ML RESORT PARCEL, 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 MARCH, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ML RESORT PARCEL, LLC" WAS FORMED ON THE TWELFTH DAY OF MARCH, A.D. 2019.

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

2020 Hass -5 ATT 10: 54



Authentication: 202515438

Date: 03-04-20

7321857 8300 SR# 20201914677