# M20000006572

| (Requestor's Name)   |
|--|
| (Address)  |
| (Address)  |
| (City/State/Zip/Phone #)   |
| PICK-UP WAIT MAIL  |
| (Business Entity Name)   |
| (Document Number)  |
| Certified Copies Certificates of Status  |
| Special Instructions to Filing Officer: 378  |
| Special Instructions to Filing Officer: (32 0000) 50428 267 (32 00 |
| W2000034543  |
| Permission to dulib 2821   |

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### COVER LETTER

| UBJECT: VENTECH GLOBAL LLC  |                         |                              |                |
|---|-------------------------|------------------------------|----------------|
|   | ne of Limited Liability | Company                      |                |
| ne enclosed "Application by Foreign Limited Liability sistence, and check are submitted to register the above |                         |                              |                |
| ease return all correspondence concerning this matter t   | to the following:       |                              |                |
| LISETT MURCH  |                         |                              |                |
| <del></del>   | Name of Person          |                              |                |
| LISETT MURCH EA PA  |                         |                              |                |
|   | Firm/Company            |                              |                |
| 6635 W COMMERCIAL BLV   | D SUITE 207             |                              |                |
|   | Address                 |                              |                |
| TAMARAC FL 33319  |                         |                              |                |
|   | lity/State and Zip Code | 2                            |                |
| P.LISETT@YAHOO.COM  |                         |                              |                |
| E-mail address: (to b   | e used for future annua | d report notification)       | 25             |
| or further information concerning this matter, please ca  | 11:                     |                              | 2823 .11"      |
| LISETT MURCH  | at ( 954                | , 2933711                    | දා<br>1        |
| Name of Contact Person  | Area Code               | Daytime Telephone Number     | <del>. 0</del> |
| MAILING ADDRESS:  |                         | STREET ADDRESS:              | <br>(၁         |
| Division of Corporations  |                         | Division of Corporations     | ე<br>ც         |
| Registration Section  |                         | Registration Section         | C) I           |
|   |                         | Clifton Building             |                |
| P.O. Box 6327<br>Tallahassee, FL 32314  |                         | 2661 Executive Center Circle |                |

S155.00 Filing Fee & Certified Copy

☐ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

\$125.00 Filing Fee

☐ \$130.00 Filing Fee &

Certificate of Status

## 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 COMPANY TO TRANSACT BUSINESS IN THE SEATE OF FLORIDA:

|                                      |  | ie alternate name must include "I muted I ialulity Compar | ŋ, T.L.C. OE™IIC |  |  |
|--------------------------------------|--|---|------------------|--|--|
|                                      | )  |   | 1-1903536        |  |  |
| (Jurisdiction under the law of w     | luch foreign lumied hability company is organized)   | 5. (UL) number, (Capplicable)                             |                  |  |  |
|                                      |  |   |                  |  |  |
|                                      | (Date first transacted business in Florida, if prior to registra<br>(See sections 605-0804 & 605-0905, U.S. to determine pena- | tion )<br>ilty liability i                                |                  |  |  |
| 235 BERRY RD                         |  | 6635 W COMMERCIAL BLVD SUITE 207                          |                  |  |  |
| (Street Address of Principal Office) |  | (Mailing Address)   |                  |  |  |
| HOUSTON TX 77022                     |  | TAMARAC FL 33319  |                  |  |  |
| Name and street address Name:        | ss of Florida registered agent: (P.O. Box <u>NO</u><br>LISETT MURCH  | <u>Cacceptable)</u>                                       | 26. r8 F         |  |  |
| (A)C - 11                            | 6635 W COMMERCIAL BYLD STE 207   |   | :<br>. ယူ        |  |  |
| Office Address:                      |  | 2224  | <u>;;</u>        |  |  |
| Office Address:                      | TAMARAC  | 33319<br>, Florida  |                  |  |  |

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: Name: ZUHELEN POLEO Manager Manager Manager Name: \_\_\_\_ Address: 235 BERRY RD Member ☐ Member Address: \_\_\_\_ **HOUSTON TX 77022** Authorized Authorized Person Person []Other\_ Other\_ Other Other\_\_\_\_ JERALD ESCALONA RUDAS Manager Manager | Name: 235 BERRY RD Member Address: Member Address: \_\_\_\_\_ HOUSTON TX 77022 ☐ Authorized Authorized Person Person Other Other\_\_\_\_ Other Other Name: FRANCISCO ARIAS Manager ☐ Manager Name: \_\_\_ \_\_\_\_\_ 235 BERRY RD Member Address: ☐ Member Address: \_\_\_\_\_ **HOUSTON TX 77022** Authorized Authorized Person Person Other Other\_\_\_\_ Other Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filling your Florida Department of State Annual Report form. 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

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



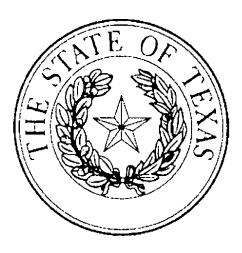
## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Ventech Global LLC (file number 803134665), a Domestic Limited Liability Company (LLC), was filed in this office on October 04, 2018.

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

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 July 29, 2020.



Phone: (512) 463-5555

Prepared by: Rence Guerrero

Ruth R. Hughs
Secretary of State

P: Co.

Dial: 7-1-1 for Relay Services

Document: 986290070002



May 21, 2020

LISETT MURCH 6635 W COMMERCIAL BLVD STE 207 TAMARAC, FL 33319 US

SUBJECT: VENTECH GLOBAL LLC

Ref. Number: W20000050428

We have received your document for VENTECH GLOBAL LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Sharon D Franklin Regulatory Specialist II

RECEIVED.

Letter Number: 920A00010311