8/18/2020

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067

Phone : (845)425-0077 Fax Number : (845)818-3588

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

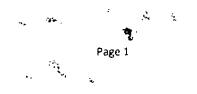
Email Address:

Foreign Limited Liability Company MiRgster, LLC

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\$125.00

Electronic Filing Menu Corporate Filing Menu Min 5 - 2000 Help





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MIRGSTER, 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 EIGHTEENTH DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MIRGSTER, LLC" WAS FORMED ON THE FOURTEENTH DAY OF JULY, A.D. 2020.

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

3241063 8300 SR# 20206813785 Authentication: 203494147

Date: 08-18-20

18886118813 From: Vcorp Services, LLC

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

(Name of Foreign I	amited Liability Company; must include "Limited	Lability	Company," "L.L.C.," or "L.L.C.")		
ing univaliable, enter alternate na	ame adopted for the purpose of transacting business in Fig.	irida. The a	diernate name must include "Limited Liability Company," "L.L.C," or "Li.C."		
elaware			85-2020097		
Octaware (Jurisduction under the law of which foreign limited liability company is organized)		3.	· · ·		
(HEISTIGHTON UNDER THE INW OF WR	en tolergu timued naminty company is organized;		(Fra number, is admicable)		
	(Date first transacted business in Florids, if prior to r (See sections 605.0904 & 605.0905, F.S. to determine	egistration.)		
•					
1717 N. Bayshore Drive	1717 N. Bayshore Drive, #2740		1717 N. Bayshore Drive, #2740 6.		
et Address of Principal Office)		-	(Mailing Address)		
Miami, FL 33132			Miami, FL 33132		
		-			
	·				
	,, 	-			
N	C. Charida annistanad assats (D.C.). Base	MOVE			
Name and street address	of Florida registered agent: (P.O. Box	NOLA	ессринове)		
			592		
Name:	Ghassan E. Fahel, D.O.				
	1717 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Office Address:	1717 N. Bayshore Drive, #2740				
	N.C.		22122		
	Miami		33132		
			, Florida s		

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: Ghassan E. Fahel , D.O.	□Manager	Name:
■ Member	Address: 1717 N. Bayshore Drive, #2740	□Member	Address:
□Authorized	Miami, FL 33132	□Authorized	
Person		Person	
C.Other	□Other	□Other	Other
□Manager	Name:Tania Maria Camacho	□Manager	Name:
X Membe r	Address: 1717 N. Bayshore Drive, #2740	∐Member	Address:
□Authorized	Miami, FL 33132	□Authorized	
Person		Person	
Other	Other	Other	□Other
⊡Manager	Name:	□Manager	Name:
⊆ Member	Address:	□Member	Address:
□: Authorized		□Authorized	
Person		Person	
ZOther	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 filing 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 \$817.155, F.S.

Ghassan fahel, D.O.

Signature of an authorized person

Ghassan E. Fahel, D.O.