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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

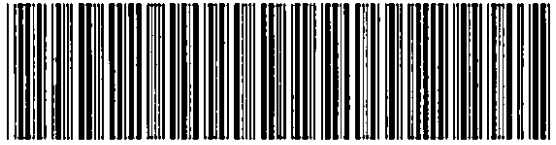
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Miami Holdings, LLC, a Puerto Rico limited liability company  
\_\_\_\_\_  
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:

Samuel Spencer Blum, Esquire  
\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

2606 Tigertail Avenue, Suite 106  
\_\_\_\_\_  
Address

Coconut Grove, Florida 33133  
\_\_\_\_\_  
City/State and Zip Code

laura@samblum.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Samuel S. Blum	305	854-1885
_____ Name of Contact Person	at (_____) Area Code	_____ Daytime Telephone Number

**Mailing Address:**  
 Registration Section  
 Division of Corporations  
 P.O. Box 6327  
 Tallahassee, FL 32314

**Street Address:**  
 Registration Section  
 Division of Corporations  
 The Centre of Tallahassee  
 2415 N. Monroe Street, Suite 810  
 Tallahassee, FL 32303

Enclosed is a check for the following amount:  
 Please make check payable to: **FLORIDA DEPARTMENT OF STATE**  
 \$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

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

Miami Holdings RMG, 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. Puerto Rico (Jurisdiction under the law of which foreign limited liability company is organized) 3. (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. 8421 SW 124 Avenue (Street Address of Principal Office) Apartment 102 Miami, Florida 33183

6. 8421 SW 124 Avenue (Mailing Address) Apartment 102 Miami, Florida 33183

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

Name: Samuel Spencer Blum, Esquire  
Office Address: 2666 Tigertail Avenue, Suite 106 Coconut Grove, Florida 33133

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.

(Registered agent's signature)

8. For internal reporting purposes, list names, titles, addresses, telephone numbers (range) and fax numbers (range) (up to six in total)

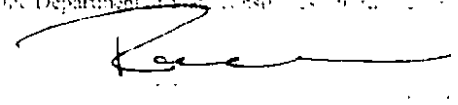
<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Raul A. Morales	_____	_____
<input type="checkbox"/> Member	Address: 8421 SW 124 Avenue	_____	_____
<input type="checkbox"/> Authorized Person	Address: 1907 Miami, Florida 33183	_____	_____
<input type="checkbox"/> Other	Other: _____	_____	_____
<input type="checkbox"/> Manager	Name: _____	_____	_____
<input type="checkbox"/> Member	Address: _____	Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	_____	_____
<input type="checkbox"/> Other	Other: _____	_____	_____
<input type="checkbox"/> Manager	Name: _____	Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	_____	Address: _____
<input type="checkbox"/> Authorized Person	_____	_____	_____
<input type="checkbox"/> Other	Other: _____	_____	_____

2020 Filing Fee  
 \$ 500.00

Important Notice: Use an attachment to report more than six (6) individuals. Attachments will be indexed for reporting purposes only. Not indexed 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, as 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 the law of the translator must be submitted.

10. This document is executed in accordance with section 607.011, Florida Statutes, and shall be filed with any other documents submitted to the Department of State, unless otherwise indicated on this form.

  
 \_\_\_\_\_

Raul A. Morales



Government of Puerto Rico

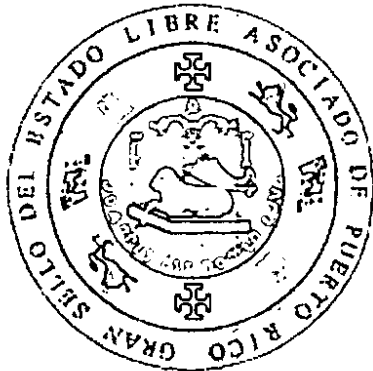
## CERTIFICATE OF EXISTENCE

I, **Elmer L. Roman, Secretary of State** of the Government of Puerto Rico,

**CERTIFY:** That according to our records **MIAMI HOLDINGS, LLC**, with registration number **433990**, is a **domestic for profit limited liability company** organized on **September 25, 2019**.

*This certification does not certify that this corporation has filed its annual reports, pursuant to the requirements of the General Corporations Law, as amended. If you need to know if such reports have been filed, you must request a Certificate of Good Standing.*

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**IN WITNESS WHEREOF**, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Government of Puerto Rico, in the City of San Juan, Puerto Rico, today, **August 10, 2020**.

**Elmer L. Roman**  
Secretary of State

To validate this certificate go to: <http://estado.pr.gov/>

This certificate can be validated an unlimited number of times before its expiration date of 10-Aug-2021.

Certificate Validation Number: 358228-12906263