

M23000007454

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

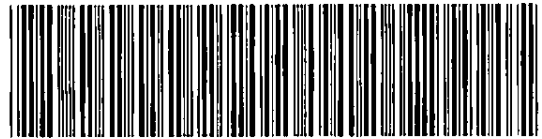
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

M23000071B69

Office Use Only



300407793963

0004 01 0000 000 0000

FILED

2023 JUN -8 PM 4:39

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2023

JOSE A SILVA
PO BOX 801469
COTO LAUREL, PR 00780 US

SUBJECT: MOGGLEY INTERNATIONAL INC.
Ref. Number: W23000071869

We have received your document for MOGGLEY INTERNATIONAL INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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.

Andrea Andrews
Regulatory Specialist II

Letter Number: 123A00011423

RECEIVED
JUN 08 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOGGLEY INTERNATIONAL INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JOSE A SILVA

Name of Person

GRUPO SILVA, INC

Firm/Company

PO BOX 801469

Address

COTO LAUREL, PR 00780

City/State and Zip code

jsilvacpa@gruposilvaprr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE A SILVA

at (787) 290-9290

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee.
Certificate of Status &
Certified Copy |
|---|--|--|---|

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. MOGGLEY INTERNATIONAL INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. BELIZE 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JANUARY 25, 2018 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 110 SW 19TH ROAD, MIAMI, FL 33219
(Principal office street address)

PO BOX 161087, MIAMI, FL 33116
(Current mailing address, if different)

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

Name: JULIAN TURIZO

Office Address: 110 SW 19TH ROAD

MIAMI, Florida 33219
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

FILED
2023 JUN - 8 PM 4: 38
TALLAHASSEE, FL

A: DIRECTORS

☐ Chairman Name: JULIAN TURIZO
☐ Vice Chairman Address: 110 SW 19TH ROAD
☐ Director MIAMI, FL 33219
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____


☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. JULIAN TURIZO
(Typed or printed name and capacity of person signing application)



BELIZE COMPANIES & CORPORATE AFFAIRS REGISTRY

CERTIFICATE OF GOOD STANDING

The Belize Companies & Corporate Affairs Registry HEREBY CERTIFIES, pursuant to the BELIZE COMPANIES ACT, 2022 a business entity is of good standing on the date set out below.

MOGGLEY INTERNATIONAL INC.

Registration Number **000016232**

This certifies that the above-named Private Company on the date hereof:

(a) has not submitted to the Registry articles of merger, consolidation or arrangement that have not yet become effective; (b) is not in the process of being liquidated, wound up and dissolved; (c) proceedings to strike the name of the business entity off the Register have not been instituted.

Dated this
18 of April 2023
Certificate No. CERT-REQ-23/76272



Deputy Registrar
Belize Companies & Corporate
Affairs Registry



L10J7J9CUCKF



APOSTILLE

(CONVENTION DE LA HAYE DU 5 OCTOBRE 1961)

COUNTRY: BELIZE

1. PUBLIC DOCUMENT CERTIFICATE OF GOOD STANDING

2. HAS BEEN SIGNED BY SANTIAGO GONZALEZ

3. ACTING AS DEPUTY REGISTRAR

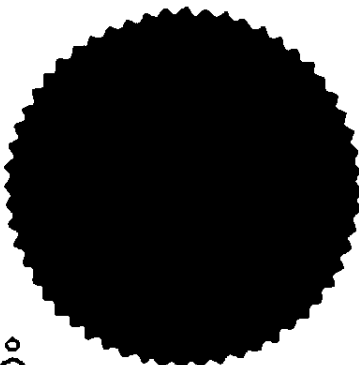
4. BEARING THE SEAL/STAMP OF
BELIZE COMPANIES AND CORPORATE AFFAIRS REGISTRY

5. AT BELIZE CITY 6. CERTIFIED ON 18 April, 2023

7. BY ALMA GALEANO

8. UNDER NO. IFSC-11375

9. SEAL



for DIRECTOR GENERAL
INTERNATIONAL FINANCIAL
SERVICES COMMISSION