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Florida Department of State  
Division of Corporations  
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Foreign Limited Liability Company  
Plenitud DV LLC

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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**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. Plenitud DV LLC  
(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "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. U.S. Virgin Islands  
(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. 21378 Marina Cove Circle Apt B17  
(Street Address of Principal Office)  
  
Miami, FL 33180

6. 21378 Marina Cove Circle Apt B17  
(Mailing Address)  
  
Miami, FL 33180

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

Name: Maria Fazio  
  
Office Address: 21378 Marina Cove Circle, Apt B17  
  
Miami \_\_\_\_\_, Florida 33180  
(City) (Zip code)

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**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.*

Jenisa Irizarry  
(Registered agent's signature) Jenisa Irizarry, Attorney-in-Fact



Business Entity No. DC0123971



Government of  
The United States Virgin Islands

-O-

Office of the Lieutenant Governor  
Division of Corporations & Trademarks

# CERTIFICATE OF GOOD STANDING

To Whom These Presents Shall Come:

I, the undersigned Lieutenant Governor the United States Virgin Islands, do hereby certify that **PLENITUD DV LLC** has filed in the Office of the Lieutenant Governor the requisite annual reports and statements as required by the Virgin Islands Code, and the Rules and Regulations of this Office. In addition, the aforementioned entity has paid all applicable taxes and fees to date, and has a legal existence not having been cancelled or dissolved as far as the records of my office show.

Wherefore, the aforementioned entity is duly formed under the laws of the Virgin Islands of the United States, is duly authorized to transact business, and, is hereby declared to be in good standing as witnessed by my seal below. This certificate is valid through June 30th, 2024.

**Entity Type:** Domestic Limited Liability Company

**Entity Status:** In Good Standing

**Registration Date:** 04/27/2023

**Jurisdiction:** United States Virgin Islands, United States

Witness my hand and the seal of the Government of the United States Virgin Islands, on this 25th day of July, 2023.



Tregenza A. Roach  
Lieutenant Governor  
United States Virgin Islands