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(Business Entity Name)						
(Document Number)						
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COVER LETTER

	egistration Section ivision of Corporations	••				
SUBJECT	. MEC CONSULTING, LLC					
, 13., 13., 1	Name	e of Limited Liability Company				
The enclos Existence,	sed "Application by Foreign Limited Liability (and check are submitted to register the above)	Company for Authorization to Transact Business in Florida." Certificate o referenced foreign limited liability company to transact business in Florida				
Please retu	irn all correspondence concerning this matter to	o the following:				
	Jennifer Snyder					
		Name of Person				
	Snyder International Law G	roup P.A.				
		Firm/Company				
	21500 Biscayne Blvd. Suite 401					
	Address					
	Aventura, FL 33180					
	City/State and Zip Code					
	info@snyderintl.com					
	E-mail address: (10 be	e used for future annual report notification)				
For further	information concerning this matter, please cal	il:				
	Jennifer Snyder	786 899-2890				
_	Name of Contact Person	Area Code Daytime Telephone Number				
<u> </u>	lailing Address:	Street Address:				
Registration Section		Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
1	allahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
þ	nclosed is a check for the following amount: lease make check payable to: FLORIDA DEP & \$125.00 Filing Fee	e & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate				



July 22, 2024

JENNIFER SNYDER 21500 BISCAYNE BLVD STE 401 AVENTURA, FL 33180

SUBJECT: MEC CONSULTING, LLC

Ref. Number: W24000105976

We have received your document for MEC CONSULTING, 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.Ł.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer 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.

Tracy L Lemieux Regulatory Specialist II

RECEIVED

Letter Number: 224A00016034

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And the second

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION (05.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Delaware Ourisdiction under the law of wh	ch foreign limited liability company is organized)	3. 82-4337099 (FEI number, il applicable)		
Date of Registra				
	(Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905; F.S. to determine penalty has	ability)		
21500 Biscayne I	Blvd 6	21500 Biscayne Blvd (Mailing Address)		
et Address of Principal Office)		(Mailing Address)		
Suite 401		Suite 401		
Aventura, FL 33	3180	Aventura, FL 33180		
Julie and Micel address	of Florida registered agent: (P.O. Box <u>NOT</u> ac		22 22	
Name:	Snyder Iternational Law Group, P.A.		024 AUG	
Name: Office Address:	Snyder Iternational Law Group, P.A. 21500 Biscayne Blvd, Suite 401		2024 AUG -6 A	
		 . Florida33180		
	21500 Biscayne Blvd, Suite 401	Florida	DZ4 AUG -6 AM 8: 45	

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: Eliana Chedrese P.A.	□Manager	Name:	
□Member	Address: 21500 Biscayne Blvd,	□Member	Address:	
$\ddot{\mathbf{X}}^{\mathrm{J}}\mathbf{A}$ uthorized	Suite 401 Aventura, FL 33180	□Authorized		
Person		Person		
□Other	Other	□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other		□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□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. Non-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, 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

Eliana Chedrese P.A. by Eliana Chedrese



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MEC CONSULTING, 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 FIRST DAY OF JULY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MEC CONSULTING, LLC" WAS FORMED ON THE SIXTH DAY OF FEBRUARY, A.D. 2018.

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

Authentication: 203837719

Date: 07-01-24