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(Address)

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(City/State/Zip/Phone #)

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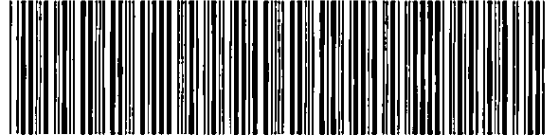
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: INEPRO GROUP B.V. LLC

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:

OLGA ADRIANA MORENO

Name of Person

WXC CORPORATION

Firm/Company

8750 NW 36th STREET SUITE 540

Address

DORAL, FL 33178

City/State and Zip Code

AMORENO@WXCCORP.COM

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

For further information concerning this matter, please call:

OLGA ADRIANA MORENO

+1

305-676-6576

at (_____) _____

Name of Contact Person

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. INEPRO GROUP B.V. 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. AMSTERDAM 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 12/31/2022
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3350 SW 148th AVE Suite 110 6. 3350 SW 148th AVE Suite 110
(Street Address of Principal Office) (Mailing Address)

MIRAMAR, FL 33027 MIRAMAR, FL 33027

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

Name: WXC CORPORATION
Office Address: 8750 NW 36th STREET SUITE 540
DORAL 33178
(City) , Florida (Zip code)

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)

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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:

☒ Manager Name: MARCO LINTING

☐ Member Address: 3350 SW 148th AVE Suite 110

☐ Authorized MIRAMAR, FL 33027

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: MIKE MULLER

☒ Member Address: 3350 SW 148th AVE SUITE 110

☐ Authorized MIRAMAR, FL 33027

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ 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.

Marco Linting

Signature of an authorized person

MARCO LINTING - MANAGER

Typed or printed name of signer



Business Register extract

Netherlands Chamber of Commerce

CCI number 28067844

Page 1 (of 2)

Legal entity

RSIN	802296671
Legal form	Besloten Vennootschap (comparable with Private Limited Liability Company)
Name given in the articles	INEPRO Group B.V.
Corporate seat	Amsterdam
First entry in Business Register	11-09-1992
Date of deed of incorporation	18-08-1992
Date of deed of last amendment to the Articles of Association	09-06-2023
Issued capital	EUR 34.125,00
Paid-up capital	EUR 34.125,00
Filing of the annual accounts	The annual accounts for the financial year 2022 were filed on 23-12-2023.

Company

Trade names	INEPRO Group B.V. IPC Group
Company start date	18-08-1992
Activities	SBI-code: 6420 - Financial holdings SBI-code: 6612 - Stockbrokers, investment consultants etc.
Employees	2

Establishment

Establishment number	000010177043
Trade names	INEPRO Group B.V. IPC Group
Visiting address	Pondweg 7, 2153PK Nieuw-Vennep
Telephone number	+31252744044
Fax number	+31252744045
Email address	info@inepro.com
Date of incorporation	18-08-1992
Activities	SBI-code: 6420 - Financial holdings SBI-code: 6612 - Stockbrokers, investment consultants etc. For further information on activities, see Dutch extract
Employees	2

Sole shareholder

WAARMERK
KAMER VAN HOOFDZAKEN

This extract has been certified with a digital signature and is an official proof of registration in the Business Register. You can check the integrity of this document and validate the signature in Adobe at the top of your screen. The Chamber of Commerce recommends that this document be viewed in digital form so that its integrity is safeguarded and the signature remains verifiable.

2024-05-23 12:07:05



Business Register extract

Netherlands Chamber of Commerce

CCI number 28067844

Page 2 (of 2)

Name	I-Smart B.V.
Visiting address	Pondweg 7, 2153PK Nieuw-Vennep
Registered under CCI number	87207753
Sole shareholder since	09-06-2023 (registration date: 12-06-2023)

Board member

Name	I-Smart B.V.
Visiting address	Pondweg 7, 2153PK Nieuw-Vennep
Registered under CCI number	87207753
Date of entry into office	09-06-2023 (registration date: 12-06-2023)
Title	Director
Powers	Solely/independently authorised

Extract was made on 23-05-2024 at 12.07 hours.