

P230000628684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

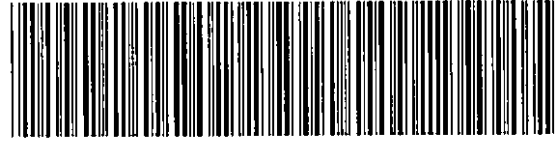
(Business Entity Name)

(Document Number)

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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. MFM Overseas Ventures Holdings LTD.
 (CORPORATE NAME) (DOCUMENT #)

2. _____
 (CORPORATE NAME) (DOCUMENT #)

3. _____
 (CORPORATE NAME) (DOCUMENT #)

Walk-In X Pick up time: _____ Certified Copy Certificate Of Status

New Filings	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input checked="" type="checkbox"/>	Other: <u>Domestication</u>

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials	
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Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, MARIA FERNANDA DE LA SOLEDAD MERINO SIMOSA THE SOLE DIRECTOR
(Name) (Title)
of MFM OVERSEAS VENTURES HOLDINGS LTD., a foreign
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of
Domestication.

1. The name of the domesticating corporation is MFM OVERSEAS VENTURES
HOLDINGS LTD. (Foreign Corporation)
2. The jurisdiction and date of its formation is NEVIS, DECEMBER 31, 2018
3. The name of the domesticated corporation is MFM OVERSEAS VENTURES HOLDINGS LTD. CORP.
4. The jurisdiction of formation of the domesticated corporation is **Florida**
5. The domestication corporation is a foreign corporation and the domestication was approved in accordance with its organic law.
6. Attached are Florida Articles of Incorporation to complete the domestication requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation



(Authorized Signature)

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SECRETARY OF STATE
FILED

ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Name & Title: MARIA FERNANDA MERINO SIMOSA - D

Address: 11179 NW 72ND TERRACE
DORAL, FL 33178

Name & Title: MARIA FERNANDA MERINO SIMOSA - P/S

Address: 11179 NW 72ND TERRACE
DORAL, FL 33178

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

I submit this document and affirm that the facts stated herein are true. I am 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.



Signature/Authorized Person

APRIL 10, 2023

Date