

| uestor's Name) | |
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| ress) | |
| ress) | |
| /State/Zip/Phone | e #) |
| ☐ WAIT | MAIL |
| iness Entity Nan | ne) |
| ument Number) | |
| Certificates | of Status |
| iling Officer: | |
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| | ress) /State/Zip/Phone WAIT iness Entity Nar ument Number) Certificates |

Office Use Only



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T. CLINE

APR - 7 2009

EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|---|---|-----------------------------|------|
| SUBJECT: MVC Group LLC | | | |
| | Name of Alien Business Organization) | | |
| Dear Sir or Madam: | | | |
| The enclosed Designation of Registere are submitted for filing. | ed Agent and Registered Office for Alien Business Org | anization and fee | :(s) |
| Please return all correspondence conce | erning this matter to the following: | | |
| | | | |
| John Adams | | | |
| (Name of Person |) | | |
| John Adams MBA-PB | | | |
| (Firm/Company) | | | • |
| 8661 NW 24th Street | | 2009 APR -3 SECRETARY | |
| (Address) | | | 77 |
| | | AND REAL PROPERTY. | |
| Sunrise, FI 33322 | <u> </u> | | i. |
| (City/State and Zip Co | ode) | | |
| For further information concerning this | s matter, please call; | PM 3: 07 OF STATE EFFLORIOA | |
| John Adams | at (_954) _548-9283 | | |
| (Name of Person) | (Area Code & Daytime Telephone Number) | | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: | | |
| Registration Section Division of Corporations | Registration Section | | |
| Clifton Building | Division of Corporations P.O. Box 6327 | | |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 | | |
| Tallahassee, Florida 32301 | | | |
| Enclosed is a check for the following | amount: | | |
| ✓ \$35.00 Filing Fee | \$43.75 Filing Fee & Certified Co | ру | |

DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

| (Name of alien busine | ess organization) |
|--|---|
| 2 New York | 3 15-3226851 |
| (State or country under which entity is organized) | (FEI Number, if applicable) |
| | 1 |
| 4. 12251 Sand Wedge Dr. Boynton Beach, Fl. 33437-200 | |
| (Principal offic | e address) |
| 5. Name and Florida Street address of registered agent. | |
| John Adams MBA-PB | |
| 8661 NW 24th Street | |
| Sunrise, Fl. 33322 | |
| 5. The street address of the registered office and the street ad are identical (Signature of chairman, vice) | J J |
| Paul Geraci Managing Member. | 2.2 |
| (Name and capacity of person s | - C |
| 9. Signature of registered agent: | ARETA ARETA |
| hereby accept the appointment as registered agent. I a 507.0505, Florida Statutes. | um familiar with and accept the obligations of se |
| and miller | 02/05/2009 - Sm |
| (Registered agent accepting appoinment) | (Date) |
| (/ | |

THE FILING OF THIS ALIEN BUSINESS ORGANIZATION FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

FILING FEE \$35

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

MAYO Carina LLO