

F150000620143 Florida Department of State
 Division of Corporations
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To: Division of Corporations
 Fax Number : (850)617-6381

From: Account Name : INCORP SERVICES INC
 Account Number : I20120000007
 Phone : (702)866-2500
 Fax Number : (702)866-2689

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 TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: managedreports@incorp.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Primera Health and Wellness Company

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Primera Health and Wellness Company
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JoAnne Stefanov
Name of Person

InCorp Services, Inc.
Firm/Company

2360 Corporate Circle, Suite 400
Address

Henderson, NV 89074
City/State and Zip code

managedreports@incorp.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JoAnne Stefanov for InCorp Services, Inc. at (702) 866-2500
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Primera Health and Wellness Company

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Georgia

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. January 02, 2015

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon registration

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3060 Peachtree Road Ste., 965, Atlanta, GA 30305

(Principal office address)

3060 Peachtree Road Ste., 965, Atlanta, GA 30305

(Current mailing address)

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TALLAHASSEE FLORIDA

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

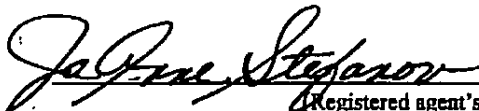
Name: InCorp Services, Inc.

Office Address: 17888 67th Court North

Loxahatchee, Florida 33470
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.



JoAnne Stefanov on behalf of InCorp Services, Inc.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Shue Kothari

Address: 800 Virginia Ave., Ste. 200, Atlanta, GA 30354

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: Krishnan Arunachalam

Address: 800 Virginia Ave., Ste. 200, Atlanta, GA 30354

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____



Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is 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.

13. Shue Kothari, President

(Typed or printed name and capacity of person signing application)

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*H15000620143***STATE OF GEORGIA**

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 15004667
DATE INC/AUTH/FILED: : January 02, 2015
JURISDICTION : Georgia
PRINT DATE : 03/02/2015

shallesh kothari
800 virginia ave
atlanta, GA 30318

CERTIFIED COPY

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents maintained by the Corporations Division of the Office of the Secretary of State of Georgia under the name of

Primera Health and Wellness Company
A Domestic For-Profit Corporation

Said entity was formed in the jurisdiction set forth above and has filed in the Office of Secretary of State on the 2nd day of January, 2015 its certificate of limited partnership, articles of incorporation, articles of association, articles of organization or application for certificate of authority to transact business in Georgia. This Certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 03/02/2015

*B: P. Kemp*

Brian P. Kemp
Secretary of State

Tracking #: vDKGBiwD

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