

# MI8000005457

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

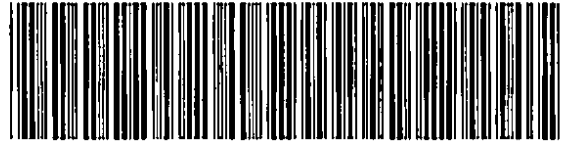
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2018 JUN - 7 AM 8:01  
TALLAHASSEE FLORIDA

JUN 08 2018  
J. HARRIS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PROSTASIA TECHNOLOGY 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:

STEPHEN R. STACK  
Name of Person

PROSTASIA TECHNOLOGY LLC  
Firm/Company

1250 MAYVIEW WAY  
Address

WELLINGTON, FL 33414  
City/State and Zip Code

STEPHENSTACK88@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHEN R. STACK at (561) 718-0400  
Name of Contact Person Area Code Daytime Telephone Number

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

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$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

561



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 31, 2018

STEPHEN R STACK  
1250 MAYVIEW WAY  
WELLINGTON, FL 33414

SUBJECT: PROSTASIA TECHNOLOGY LLC  
Ref. Number: W18000051214

We have received your document for PROSTASIA TECHNOLOGY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not 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.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 118A00011303

2018 JUN -7 AM 8:01  
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**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. PROSTASIA TECHNOLOGY 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. NEVADA, US.  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. \* 83-0581633  
(FBI number, if applicable)

4. WILL COMMENCE AFTER FLORIDA REGISTRATION  
(Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 1250. AAA MAYVIEW WAY  
(Street Address of Principal Office)  
WELLINGTON, FL 33414

6. \_\_\_\_\_  
(Mailing Address)

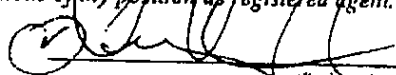
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: TIMOTHY R ANDERSON  
 Office Address: 480 MAPLEWOOD DR. Ste 5  
JUPITER, FL 33458, Florida 33458  
(City) (Zip code)

2016 JUN - 7 AM 8:01  
 MAIL ROOM  
 FLORIDA DEPARTMENT OF STATE  
 TALLAHASSEE, FLORIDA

**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)

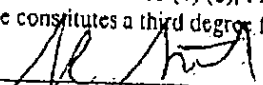
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>MANAGING MEMBER</u>	<u>STEPHEN R. STACK</u> <u>1250 MAYVIEW WAY</u> <u>WELLINGTON, FL</u> <u>33414</u>		
<u>MGR. MEMBER</u>	<u>PETER N. CHRISTOS</u> <u>1250 MAYVIEW WAY</u> <u>WELLINGTON, FL</u> <u>33414</u>		

(Use attachments if necessary)

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  
STEPHEN R. STACK  
Typed or printed name of signor

# SECRETARY OF STATE



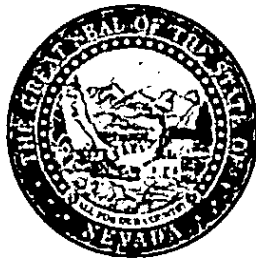
## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **PROSTASIA TECHNOLOGY LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 18, 2018, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 31, 2018.

Barbara K. Cegavske  
Secretary of State



Electronic Certificate  
Certificate Number: C20180531-2332