

M 21 000003567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

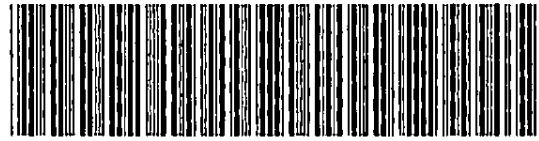
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 MAR 15 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FL

CS
3/29/20

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. APS USA, LLC.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," 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," "LLC.," or "LLC.")

2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

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

5. 5700 NW 32 COURT
(Street Address of Principal Office)

6. SAME
(Mailing Address)

MIAMI FL 33142

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

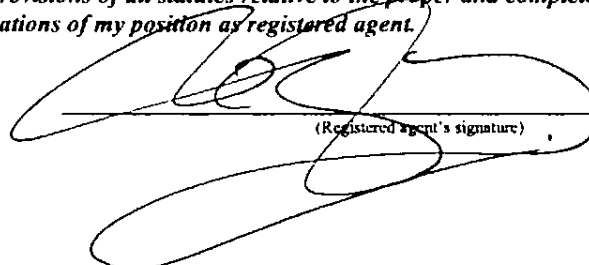
Name: BELLO & MARTINEZ, PLLC

Office Address: 2850 S. DOUGLAS ROAD, SUITE 303

CORAL GABLES, Florida 33134
(City) (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: Manager **Name and Address:**
 Name: PEDRO L. AMADOR
 Address: 5700 NW 32 COURT
 MIAMI FL 33142
 Person
 Other _____ Other _____

Manager **Name:** JORGE AMADOR
 Member **Address:** 5700NW 32 COURT
 Authorized MIAMI FL 33142
 Person
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
 Person
 Other _____ Other _____

Title or Capacity: Manager **Name and Address:**
 Name: GLOBAL APS CORP.
 Address: 251 Little Falls Drive
 Wilmington DE 19808
 Person
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
 Person
 Other _____ Other _____


Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
 Person
 Other _____ Other _____

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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.



 Signature of an authorized person

03/12/2021

PEDRO L. AMADOR

 Typed or printed name of signer

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "APS USA LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF MARCH, A.D. 2021.


AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "APS USA LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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SECRETARY OF STATE
TALLAN SEE, FL

FILED




Jeffrey W. Bullock, Secretary of State

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SR# 20210858495

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202696549

Date: 03-10-21