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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER*

TO: Registration Section Division of Corporation	ns			
SUBJECT: PREMIUM TICK	ETS, INC			
30b/ECT:	Name of corporation - n	nust include suffix		
Dear Sir or Madam:				
The enclosed "Application by I "Certificate of Existence." or " above referenced foreign corpo	Certificate of Good Standin	g" and check are submitted	ness in Florida." to register the	
Please return all correspondenc	e concerning this matter to	the following:		
MONIR BULHOSEN LLOP C/O	SORAYA BULHOSEN			
	Name of Per	son	•••	
PREMIUM TICKETS, INC				
	Firm/Compar	ıy		
1443 BLACKSTONE AVE.				
	Address			
CHULA VISTA, CA 91915.				
	City/State and	Zip code		
MONIR@PREMIUMTICKETS.			tion)	
E-m	ail address: (to be used for	future annual report notifica	tion) - دخ	
For further information concer-	ning this matter, please call		<u>ප</u>	
		:		
MONIR BULHOSEN LLOP	at ()	783-8087	 Ω	
Name of Person	Area Code	Daytime Telephone N	lumber .	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
_	.ORIDA DEPARTMENT OF \$78.75 Filing Fee &	78.75 Filing Fee & 📁 🗎 : Certified Copy	\$87.50 Filing Fee. Certificate of Status & Certified Copy	

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. PREMIUM TIC	CKETS, INC				
	corporation; must include "INCORPORATED Corp." "Inc.," "Co.," or "Corp.")	D," "COMPANY," "CORPORATION,"			
PREMIUM TIC	CKETS, INC				
(If name unavail	able in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting bus	siness in Florida)		
2. CALIFORNIA		3			
2. (State or country under the law of which it is incorporated)		3(FEI number, if applica	(FEI number, if applicable)		
4. 06/12/2014		5			
(Date of incorporation)		(Date of duration, if other than	(Date of duration, if other than perpetual)		
6. TO BE DETER					
	(Date first transacted business (SEE SECTIONS 607.1501 & 607 ONE AVE, CHULA VISTA, CA 91915.	s in Florida, if prior to registration) .1502, F.S., to determine penalty liability) office street address)	. .		
		ling address, if different)			
8. Name and stre	et address of Florida registered agent: (F	P.O. Box NOT acceptable)	~ ·		
Name:	Registered Agents Inc.		•		
Office Address:	7901 4th St N. STE 300		<u>_</u>		
	St. Petersburg,	, Florida	- •		
	(City)	(Zip code)	Ç		

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.

Beether (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.

A. DIRECTORS						
Chairman	Name: MONIR BULHOSEN LLOP	□Chairman	Name:	<u> </u>		
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	JARDINES DE SAN MATEO,	□Director		<u></u>		
■ President	NAUCALPAN DE JUAREZ.	□President				
□Vice President	ESTADO DE MEXICO, C.P. 53240	□Vice President				
■ Secretary	■ Treasurer	☐ Secretary		□Treasurer		
□Other	Other	□Other		□Other		
□Chairman	Name:	□ Chairman	Name:			
	Address:					
□ Director		□Director				
□President		□President				
		□Vice President				
				☐Treasurer		
Secretary	□Treasurer	Secretary				
Other	Other	□Other		□Other		
□ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director		·		
□President		□President				
□Vice President		□Vice President	<u> </u>	: 		
□ Secretary	□Treasurer	☐ Secretary		☐Treasurer =		
□Other	□Other	□Other		□Other		
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. MONIR BULHOSEN LLOP						
12. Signature of Director or Officer						
The officer or director signing this document (and who is listed in number 11 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.						
MONIR BULHOSEN LLOP						



I. ALEX PADILLA, Secretary of State of the State of California, hereby certify:

Entity Name:

PREMIUM TICKETS, INC.

File Number:

C3684633

Registration Date:

06/12/2014

DOMESTIC STOCK CORPORATION

Entity Type: Jurisdiction:

CALIFORNIA

Status:

ACTIVE (GOOD STANDING)

As of October 13, 2020 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.

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IN WITNESS WHEREOF. I execute this certificate and affix the Great Seal of the State of California this day of October 14, 2020.

ALEX PADILLA Secretary of State

Certificate Verification Number: YDJEN1Y

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at bebizfile.sos.ca.gov/certification/index.