

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations			
PRIVILEGE CONSTRUCTION CORP			
SUBJECT: Name of corporation	must include entity		
Name of corporation	- must include surfix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standabove referenced foreign corporation to transact business	ling" and check are submitted to register the		
Please return all correspondence concerning this matter	to the following:		
CHRISOVALANDIS MINADAKIS			
Name of I	Person		
PRIVILEGE CONSTRUCTION			
Firm/Com	pany 277		
3720 30 AV			
Addre	SS		
ASTORIA NY 11103	(,)		
	nd Zip code		
City/State and Zip code			
PRIVILEGECONSTRUCTIONNY@GMAIL.COM	or future annual report notification)		
E-man address. (to be used i	or rutare annual report notations,		
For further information concerning this matter, please c	all:		
CHRIS MINADAKIS 917	476-7449		
Name of Person Area Code	e Daytime Telephone Number		
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		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT \$ 770.00 Filing Fee \$ \$78.75 Filing Fee & Certificate of Status	OF STATE S78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certified Copy Certified Copy		

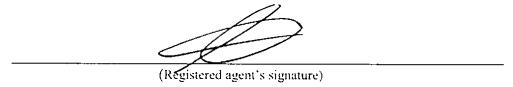
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.	CONSTRUCTION CORP.			
(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPORATED," Corp," "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
PRIVILEGE B	UILDERS			
(If name unavai	lable in Florida, enter alternate corporate name a	lopted for the purpose of transacting l	ousiness in Florida	
NY 2.	3	46-1947642		
·	ry under the law of which it is incorporated)	(FEI number, if applicable)		
03/2013	5			
(Date	e of incorporation)	(Date of duration, if other than perpetual)		
).				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 2, F.S., to determine penalty liability)		
3720 30 AV AS	(SEE SECTIONS 607.1501 & 607.150 FORIA.NY 11103 (Principal office	Florida, if prior to registration) 2, F.S., to determine penalty liability) 2 street address)		
3720 30 AV AS	(SEE SECTIONS 607.1501 & 607.150 FORIA.NY 11103 (Principal office S BLVD EAST ELMHURST NY 11370	2, F.S., to determine penalty liability) : street address)	707	
, 3720 30 AV AS	(SEE SECTIONS 607.1501 & 607.150 FORIA.NY 11103 (Principal office S BLVD EAST ELMHURST NY 11370	2, F.S., to determine penalty liability)		
3720 30 AV AS 6904 DITMARS	(SEE SECTIONS 607.1501 & 607.150 FORIA.NY 11103 (Principal office S BLVD EAST ELMHURST NY 11370	2, F.S., to determine penalty liability) estreet address) address, if different)	262 1 1-2	
6904 DITMARS Name and stre	(SEE SECTIONS 607.1501 & 607.150 FORIA.NY 11103 (Principal office S BLVD EAST ELMHURST NY 11370 (Current mailing et address of Florida registered agent: (P.O.	2, F.S., to determine penalty liability) estreet address) address, if different)	202 1	
6904 DITMARS Name and stre	(SEE SECTIONS 607.1501 & 607.150 FORIA.NY 11103 (Principal office S BLVD EAST ELMHURST NY 11370 (Current mailing et address of Florida registered agent: (P.O. CHRIS MINADAKIS 4755 ALTON RD MIAMUREACH	2, F.S., to determine penalty liability) estreet address) address, if different)	202 1 '-2 Fill2: ?	

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.



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: CHRIS MINADAKIS	□Chairman	Name:	
□Vice Chairman	Address: 4755 ALTON RD	□Vice Chairman	Address:	
Director	MIAMI BEACH,FL 33140	□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	Secretary		□Treasurer
□Other	Other	Other		Other
□Chairman	Name:	□ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman		
□Director		□Director		
□President		□President		
□Vice President		□Vice President		2
□Secretary	□Treasurer	☐ Secretary		Treasurer.
□Other	Other	☐Other		Other 1
□ Chairman	Name:	□ Chairman	Name:	F.112: 2
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		□Director		
□President		□President		
□Vice President .		□Vice President		
□Secretary	□Treasurer	☐ Secretary		□Treasurer
Other		□Other		□Other
individuals may be a	se an attachment to report more than six (6). The attachment to report more than six (6). The attachment to the index when filing your Florida Departm	of State Annual Re	l for reporting p port form.	urposes only. Non-indexed
12.	Signature of Director	or Officer		
The officer or direct	or signing this document (and who is listed in numbers information submitted in a document to the Depar	er 11 above) affirms the timent of State constitut	at the facts stated	d herein are true and that he o e felony as provided for in

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: PRIVILEGE CONSTRUCTION CORP.

DOS ID Number: 4354067

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 01/31/2013

Statement Status: CURRENT Statement Due Date: 01/31/2023

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on October 19, 2022 at 10:40 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C. Heglan

By Brendan C. Hughes Executive Deputy Secretary of State

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