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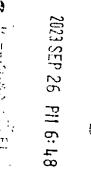
(Requestor's Name)
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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer.
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Office Use Only



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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are optional. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
 All Profit Corporations must file an Annual Report yearly to maintain "active"
 status. The first report is due in the year following formation. The report must be filed
 electronically online between January 1st and May 1st. The fee for the annual report is
 \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual
 Report Reminder Notices" are sent to the e-mail address you provide us when you submit
 this document for filing. To file any time after January 1st, go to our website at
 www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	PRIME AUTOMATION US	INC			
30001		of corporation	- must include suffix		
Dear Si	r or Madam:				
"Certifi	closed "Application by Foreign Co icate of Existence," or "Certificate referenced foreign corporation to tr	of Good Stan	ding" and check are subr		
Please 1	return all correspondence concerni	ng this matter	to the following:		
DEBOR	LA WILDER				
		Name of	Person		
THE W	ILDER GROUP				
		Firm/Com	pany		
4020 PA	ARK ST N SUITE 103				
		Addre	ess		
SAINT	PETERSBURG, FL 33709				
		City/State a	nd Zip code		
DEB@1	THEWILDERGROUP.COM				
	E-mail address	(to be used f	or future annual report n	otification)	
For furt	ther information concerning this m	atter, please c	all;		
DEBORA WILDER		at (466-9575		
	Name of Person	Area Code	Daytime Teleph	none 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		
Please n	ed is a check for the following amonake check payable to: FLORIDA DE 00 Filing Fee	PARTMENT g Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 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.

(If name unavai	name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
DELAWARE3.		38-4236139					
(State or country under the law of which it is incorporated)		(FEI number, if applicable)					
07/01/2022	5.	(Date of duration, if other than perpetual)					
(Date	e of incorporation)	(Date of duration, if other than perpetual)					
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)					
320 14 0 TH AV	E, CLEARWATER, FL. 33760	,,,,,,,, .					
		ce street address)					
	•						
	(Current mailin	ng address, if different)					
	(
Name and stre	et address of Florida registered agent: (P.C). Box NOT acceptable)					
Name:	DEBORA WILDER, CPA						
Name:	4020 B 4 DV CT N CUNTE 402						
ice Address:	4020 PARK ST N SUITE 103	<u> </u>					
	SAINT PETERSBURG	, Florida 33709					
	(City)	, Florida 33709 (Zip code)					
							
Docistored an	ent's acceptance:	r t.					

under the law of which it is incorporated.

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

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
□ Chairman	Name:	□ Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director	CLEARWATER, FL, 33760	Director	<u> </u>				
■ President		□ President					
□Vice President		□Vice President					
Secretary	□Treasurer	Secretary		□Treasurer			
□Other	Other	Other		Other			
□Chairman	Name: PAUL PUTTICK	□ Chairman	Name:				
□Vice Chairman	Address:	☐Vice Chairman	Address:				
☐ Director	CLEARWATER, FL, 33760	Director					
☐ President		□President					
■Vice President		☐Vice President					
☐ Secretary	Treasurer	Secretary		☐ Treasurer			
Other	Other	□Other		□Other			
□ Chairman	CHAD HARRISON	□ Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director	CLEARWATER, FL, 33760	Director					
☐ President		□ President					
□Vice President		□Vice President					
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.							
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.							
CHAI) HAR	RISON SECRETARY-TREASURER						

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PRIME AUTOMATION (US) INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF DECEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRIME AUTOMATION (US) INC." WAS INCORPORATED ON THE FIRST DAY OF JULY, A.D. 2022.

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

a at core delaware dov/aut

Authentication: 204761152

Date: 12-07-23