Florida Department of State

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Foreign Limited Liability Company FIRST POWER GROUP, LLC

Certificate of Status	0
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TO:	Registration Section Division of Corporation	ns				/	
SHRU	First Power Group	p, LLC					
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	nclosed "Application by F nee, and check are submi						
Please	return all correspondence	e concerning this r	matter to the	following:			
	Joy Schroeder	•					
			א	ime of Person	······································	·	
	NRAI Corpor	ate Services					
		 	Fi	m/Company			
	1021 Main St	rect, Suite 1150					
				Address			
	Houston, TX	77002					
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	jschroeder@ni	ai.com					ate :
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For fu	rther information concern	ing this matter, pl	ease call;				13/ E
	Joy Schroeder			800 at (862-543 }		AHA.
	Nan	e of Person	Are	Code & Daytin	e Telephone	Number	27 988
	MAILING ADDRES Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	ns .	Divisio Registr Clifton 2661 E	TT ADDRESS; n of Corporation ation Section Building secutive Center (asee, FL 32301			FH 1: EL
Enclo	osed is a check for the E \$125.00 Filing Fee		ing Fee &	☐ \$155,00 Fill Certified C		☐ \$160.00 Filing of Status & Co	

COVER LETTER

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. First Power Group, LLC (Name of Foreign Limited Liability Co		"Limited Liability Company," "L.L.C	," or "LLC.")	
(If name unavailable, enter alternate name additionant of the managers or managing member Company," "L.L.C," "LLC.")				en
2. Nevada	3	46-4338689		
(Jurisdiction under the law of which foreign company is organized)	limited liability	(PEI number, if applica	blc)	
4. 12/18/2013	5	Perpetual		
(Date of Organization)		(Duration: Year limited liability con exist or "perpetual")	npany will cease to	
6.				
(Date first transa (See sections 608.5	cted business in Flor 501 & 608.502 F.S. t	ida, if prior to registration.) o determine penalty liability)		
7. 8676 Hawkwood Bay Drive				
Boynton Beach, Florida 33473	· · · · · · · · · · · · · · · · · · ·		9.: ≠ ₀₀ . →	
	(Street Address o	f Principal Office)		
8. If limited liability company is a ma	nager-managed c	ompany, check here 🔀	EC 2	*****
9. The name and usual business addre	sses of the mana	ging members or managers are a	್ -ವ s follows:	
Eyal Halovy, Manager - 8676 Hawkwoo				, 1111 , 1
- yar manager - doro makadon	a Bay Dilve, Boynto	ii Besch, Florius 33473	58 -	jige ti ja ma
			결혼 🚜	Sugar
			-32	
10. Attached is an original certificate of existent the jurisdiction under the law of which it is orga- translation of the certificate under oath of the tra-	mized. (A photocopy	is not acceptable. If the certificate is in		rds in
11. Nature of business or purposes to	be conducted or	promoted in Florida:		
Any legal purpose except banking and ins				
	Spe		<u> </u>	
Signature of a n	nember or an aut)	norized representative of a memb	oer.	
penalties of perjury that the fact	s stated herein are true	tion of this document constitutes an affirma I am aware that any false information: I third degree felony as provided for in	submitted in a	
Eyal Halevy, Man		- unit a material institution tot (it	e.v.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Typed or printed	name of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	f the Limited Liability Com	pany is:	
If unavailable,	the alternate to be used in the	he state of Florida is:	
2. The name a	nd the Florida street address	s of the registered agent and office are	**
		NRAI Services, Inc.	ý ⁻ /
		(Name)	
	120	O South Pinc Island Road	58 5
	Florida Street A		
	Plantation	FL 33324 City/State/Zip	7 PA III
liability compa registered agei statutes relatin	my at the place designated in nt and agree to act in this ca g to the proper and complete	d to accept service of process for the a partie of this certificate, I hereby accept the appacity. I further agree to comply with the performance of my duties, and I am figistered agent as provided for in Chaptagon Joy Schroeder, Asst. Secretary grature)	opointment as the provisions of all faniliar with and ter 608, Florida

\$ 100.00 Filing Fee for Application

Designation of Registered Agent Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

\$ 25.00 \$ 30.00





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, FIRST POWER GROUP, 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 December 18, 2013, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20131227-0176
You may verify this electronic certificate
online at http://www.nysos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 27, 2013.

ROSS MILLER Secretary of State