

M1500 0000572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

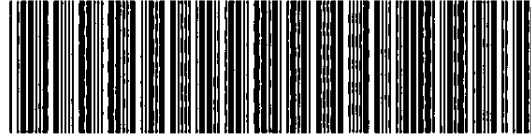
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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15 JAN 12 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 23 2015

6114

# PAF Acquisitions LLC

PO Box 447, Odessa, Florida 33556

(813) 962-1300

January 21, 2015

Division of Corporations  
Registration Section  
2661 Executive Center Circle  
Clifton Building  
Tallahassee, FL 32301

FILED  
15 JAN 12 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: PAF Acquisitions LLC Foreign Registration - Affidavit of Fact

Dear Justin,

In your absence yesterday, I spoke to Tammy regarding the affidavit language and she said the language below would fine and told me to send it directly to you as you had our funds.

I, Sherrill Mickey, Executive Assistant for PAF Acquisitions LLC, a Delaware limited liability company, do hereby make the following statements under oath regarding the dissolution of PAF Acquisitions LLC, a dissolved Florida limited liability company:

- We intend to use the same name to register the Delaware LLC as a Foreign Entity;
- We (the owners of the dissolved entity) will release the 120 day dissolved entity hold on the Florida LLC for this purpose; and
- We will not reinstate or attempt to reinstate the same name in the formation of a new entity in the future.

We would appreciate your assistance in completing our approval.

Should you have any questions or need any further information to full fill this request, please do not hesitate to contact me at 813-962-1300, ext. 213 or by email at [SMickey@PrimeAssetFund.com](mailto:SMickey@PrimeAssetFund.com).

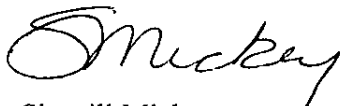
I thank you, in advance, for your assistance in this matter.

SIGNATURE PAGE TO FOLLOW

# PAF Acquisitions LLC

PO Box 447, Odessa, Florida 33556

(813) 962-1300



Sherrill Mickey

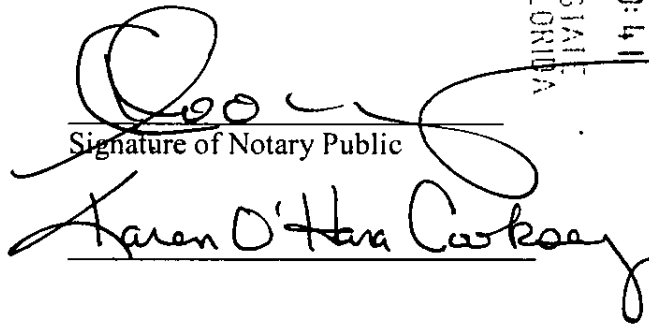
STATE OF FLORIDA  
COUNTY OF Hillsborough

The foregoing instrument was acknowledged before me this 21<sup>st</sup> day of 2015, by Sherrill Mickey in her capacity as Executive Assistant for PAF Acquisitions LLC, a Delaware limited liability company.

(Seal)



Signature of Notary Public



15 JAN 12 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: PAF Acquisitions LLC**

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

**Sherrill Mickey**

Name of Person

**PAF Acquisitions LLC**

Firm/Company

**PO Box 447**

Address

**Odessa, FL 33556**

City/State and Zip Code

**smickey@primeassetfund.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Sherrill Mickey**

Name of Contact Person

at ( **813** )

Area Code

**962-1300 x213**

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. **PAF Acquisitions LLC**

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

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

3. \_\_\_\_\_  
(FEI number, if applicable)

4. **12-12-14**

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

5. **16242 N. Florida Ave, Lutz, FL 33549**

(Street Address of Principal Office)

6. **PO Box 447, Odessa, FL 33556**

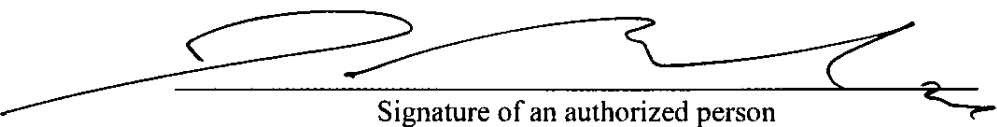
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**SW JJJ LLC**

**PO Box 447, Odessa, FL 33556**

8. Attached is an original 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. (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)

  
Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

**J Rand, Authorized Signatory**

Typed or printed name of signee

19 JAN 12 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 the Limited Liability Company is:

PAF Acquisitions LLC

If unavailable, the alternate to be used in the state of Florida is:

\_\_\_\_\_

2. The name and the Florida street address of the registered agent and office are:

Aaren Cooksey

(Name)

16242 N. Florida Ave

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Lutz

FL

33549

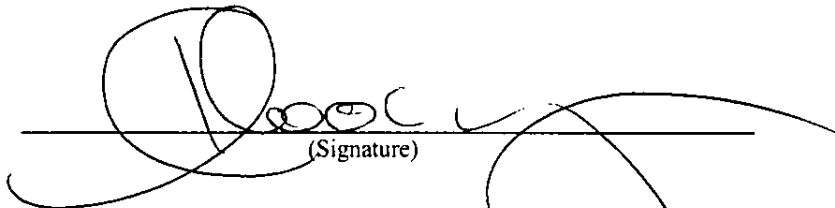
City/State/Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JAN 12 AM 10:41

FILED

*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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.*

  
(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PAF ACQUISITIONS, 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 THIRTY-FIRST DAY OF DECEMBER, A.D. 2014.


FILED  
15 JAN 12 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



5319472 8300

141600599

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2001511

DATE: 12-31-14