Florida Department of State

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Division of Corporations

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From:

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Account Number : I20120000007

Phone : (702)866-2500

Fax Number

: (702)866-2689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

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Foreign Limited Liability Company UNITABAC LLC

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COVER LETTER

UBJECT: UN	ITABAC LLC			
	Name of Li	mited Liability (Company	_
he enclosed "Ap kistence, and ch	plication by Foreign Limited Linbility Compa eck are submitted to register the above referen	ny for Authoriza ced foreign limi	tion to Transact Business in Florida ted liability company to transact busi	" Certificate ness in Flori
case return all c	orrespondence concerning this matter to the fo	llowing:		•
	Nad	ne Long		
	Nan	ne of Person		-
•	InCorp	Services, Inc		
•	· Pin	n/Company		-
	2360 Corpora	ate Circle, Su	lte 400	
		Address		• •
	Henderson	, NV 89074-7	739	
• • •	City/Sta	te and Zip Code		- ,
_		is@incorp.co	, .	
	E-mail address: (to be used	for future annua	report notification)	,
or turther inform Nadina Long	nation concerning this matter, please call: on behalf of InCorp Services, Inc.	702	866-2500	·
	Name of Contact Person	at (J	-
Division Registra P.O. Bo	NG ADDRESS: of Corporations ion Section c 6327 sec, FL 32314	-	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahasseo, FL 32301	
	ck for the following amount: 00 Filing Fee \$\square\$ \$\square\$ \$130.00 Filing Fee & Certificate of Status	. \$155.00 Filis	ng Fee & D\$160.00 Filing Fee, (of Status & Certified Co	

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H 160000 175763

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Ign Limited Liability Company; mu	ist include "Limited Linb	llity Company," "L.L.C.,	or "LLC.")	
	ternate name adopted for the purpor	e of transacting business	in Florida. The alternate	name must includ	le "Limited .
Liability Company," "L.L.C,"	or"LLC.")				
New Jersey	of school foreign limited liability	3	(Fill number, if applica	hle)	
company is organized)	of which foreign limited liability		/s to transact to abbute		
4. Upon Registration				•	
	(Date first transacted busin (See sections 605.0904 & 605	eus la Florida, il prior to 5.0905, P.S. to determine	registration.) penalty liability)		
5. 18 Commerce Roa	d, Sulte C				•
<u>Fairfield</u>	NJ Street Address of	O7004			
48 Commerce Roa		· · · · · · · · · · · · · · · · · · ·			
0,	-'				
Fairfield	NJ	07004		·	•
	(Maing	Address)		Hard Services	
7. Name and street address	g of Florida registered agent: (F	O. Box NOT accepta	able)	7	16
Name:	InCorp Services, Inc.				- 1919g
	17888 67th Court North		-	30.50	* • 1
Office Address:			• ·	27	4 4000
	Loxahatchee		, Florida <u>33470</u>		
Decisional presits acces	(City)		(Zip oode)		
			المحاشين المحامد والمناد		
	gistered agent and to accept se				
Having been named as re designated in this applica	tion, I hereby accept the appoin	ntment as registered a	gent and agree to act it	this capacity.	I further agre
Having been named as re designated in this applica to complywith the provisi		ntment as registered as proper and complete	gent and agree to act it	this capacity.	I further agre
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This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

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STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

UNITABAC LLC 0400331729

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on February 15, 2010.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

RUSHABH PATEL 18 COMMERCE RD UNIT C FAIRFIELD, NJ 07004



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 21st day of January, 2016

Jed Mrulder

Ford M. Scudder Acting State Treasurer

Certificate Number: 6021051823

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_CERT.jsp