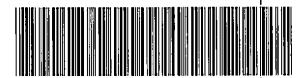
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(J.C.J.,	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Naก	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	

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OCT STARRIE

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive

Tallahassee, Florida 32312

(850) 656-4724

DATE 10-26-17

		**WALK IN
ENTITY NAME	PRIMO SOLUTIONS, L. L	C.
	•	
DOCUMENT NUM	BER_ (James @ Harbor (cmp)
	PLEASE FILE THE ATTACHED AND RETURN	
XX	Plain Copy	
′ / 	Certified Copy	
	Certificate of Status	
	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY Certified Copy of Arts & Amendments	y * *
	Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
	NUMBER OF CERTIFICATES REQUESTED	
TOTAL \$ OWEDCHECK #		

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	PRIMO SOLUTION	NS, L.L.C.			
SOBJECT.		Name of 1	Limited Liability C	Company	
The enclosed Existence, a	d "Application by For nd check are submitte	eign Limited Liability Comp d to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida," Certificate y company to transact business in Flor
Please return	n all correspondence c	oncerning this matter to the	following:		
	Harbor Compli	ance			
		N:	ame of Person		-
	Harbor Compli	ance			ı
	-	Fi	irm/Company		
	48-50 W Chest	nut St Ste 301			
			Address		
	Lancaster, PA	17603			
		City/S	tate and Zip Code		-
	mike.miller@pri	mosolutionsllc.com			
		E-mail address: (to be used	d for future annual	report not	ification)
For further i	nformation concernin	g this matter, please call:			
На	irbor Compliance		717 at (723-93	17
 -	Name c	f Contact Person	Area Code	Day	rtime Telephone Number
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section b. Box 6327 llahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section duilding ecutive Center Circle see, FL 32301
	a check for the follow \$125.00 Filing Fee	ing amount: \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ig Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

, PRIMO SOLUTIONS.				
1.	L.L.C.	1.1.11. C	9 1 Z' ")	
(Name of Fore	ign Limited Liability Company; must include "Limited L	lability Company, L.L.C., or	LIC.	
(If name unavailable, enter al Liability Company," "L.L.C,"			e must inc	lude "Limited
2. Arizona	3. 51-061866	3		<u> </u>
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)		
4	(Date first transacted business in Florida, if prior	to registration.)	•	
5. 26205 N. 54th Ave.	(See sections 605.0904 & 605.0905, F.S. to determ	me penany naomity)	-	:
Phoenix, AZ 85083				
	(Street Address of Principal Office)		•	F20
6. 26205 N. 54th Ave.				
Phoenix, AZ 85083			ş.•	C
· · · · · · · · · · · · · · · · · · ·	(Mailing Address)	· · · · · · · · · · · · · · · · · · ·	-	(၀)
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT acce	eptable)		
Name:	REGISTERED AGENTS INC		٠.	(A)
Office Address:	3030 N. ROCKY POINT DRIVE, STE 150A	_	-	9
	ТАМРА	, Florida		
	(City)	(Zip code)		
Registered agent's accep				l l
Having been named as re designated in this applica to complywith the provision	gistered agent and to accept service of process for tion, I hereby accept the appointment as registered ons of all statutes relative to the proper and complety position as registered agent.	l agent and agree to act in thi ete performance of my duties,	s capacit	v. I further agi
designated in this applica to complywith the provision	gistered agent and to accept service of process for tion, I hereby accept the appointment as registered ons of all statutes relative to the proper and complety position as registered agent.	l agent and agree to act in thi ete performance of my duties,	s capacit	v. I further agi
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the same, title or capa	gistered agent and to accept service of process for tion, I hereby accept the appointment as registered ons of all statutes relative to the proper and complety position as registered agent.	l agent and agree to act in thi ete performance of my duties, ————————————————————————————————————	s capacit	v. I further agi
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the second seco	gistered agent and to accept service of process for tion, I hereby accept the appointment as registered ons of all statutes relative to the proper and completely position as registered agent. (Registered agent's signature acity and address of the person(s) who has/have authors N. 54th Ave Phoenix, AZ 85083	l agent and agree to act in thi ete performance of my duties, ————————————————————————————————————	s capacit	v. I further agi
Having been named as redesignated in this applicate to complywith the provision accept the obligations of the second seco	gistered agent and to accept service of process for tion, I hereby accept the appointment as registered ons of all statutes relative to the proper and completely position as registered agent. (Registered agent's signature acity and address of the person(s) who has/have authorized.	l agent and agree to act in thi ete performance of my duties, ————————————————————————————————————	s capacit	v. I further agi
Having been named as redesignated in this applicate to complywith the provision accept the obligations of a Michael Miller, CEO, 262 Elisa Miller, EVP, 26205	gistered agent and to accept service of process for tion, I hereby accept the appointment as registered ons of all statutes relative to the proper and completing position as registered agent. (Registered agent's signature acity and address of the person(s) who has/have authous N. 54th Ave Phoenix, AZ 85083 N. 54th Ave Phoenix, AZ 85083 of existence, no more than 90 days old, duly author of which it is organized. (If the certificate is in a for	I agent and agree to act in this ete performance of my duties, re) nority to manage is/are: nticated by the official having of reign language, a translation of	s capacity, and I an	r. I further ago

Typed or printed name of signee

Michael Miller





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Ted Vogt, Executive Director of the Arizona Corporation Commission, do hereby certify that

***PRIMO SOLUTIONS, L.L.C. ***

a domestic limited liability company organized under the laws of the State of Arizona, did organize on the 3rd day of January 2007.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 24th day of October, 2017, A. D.



Ted Vogt, Executive Director

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