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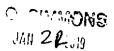
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Special Instructions to F	iling Officer:				
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 594731 4325417

AUTHORIZATION :

COST LIMIT : \$ 165 No

ORDER DATE: January 18, 2019

ORDER TIME : 3:50 PM

ORDER NO. : 594731-005

CUSTOMER NO: 4325417

FOREIGN FILINGS

NAME: PREFERRED FREEZER SERVICES

OF JACKSONVILLE II, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

COVER LETTER

TO:

Registration Section

Division of Corporations					
SUBJECT: _	Preferred Freezer Services of Jacksonville 11, LLC				
	Name of Limited Liability Company				
The enclosed " Existence, and	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Florida.				
Please return al	Il correspondence concerning this matter to the following:				
	James D. Ray				
	Name of Person				
	James D. Ray				
	1300 Mount Kemble Avenue - PO Box 2075				
Address					
	Morristown, New Jersey 07962				
City/State and Zip Code					
	jray@mdmc-law.com				
	E-mail address: (to be used for future annual report notification)				
For further info	rmation concerning this matter, please call:				
James	5 D. Ray 973 993-8100 at ()				
	Name of Contact Person Area Code Daytime Telephone Number				
Divisio Regist P.O. B	ANG ADDRESS: on of Corporations pation Section Section Division of Corporations Registration Section Cox 6327 Clifton Building assee, FL 32314 Clifton Building Comparison Capacitation Clifton Building Comparison Comparison Clifton Building Comparison Comparison Clifton Building Comparison Compa				
Enclos Please	red is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE				
_	25.00 Filing Fee \$\Bigcup \text{\$130.00 Filing Fee & Certificate of Status} \Bigcup \text{\$155.00 Filing Fee & Certified Copy} \Bigcup \text{\$160.00 Filing Fee, Certified Copy} \Bigcup \text{of Status & Certified Copy}				

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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	ices of Jacksonville II, LI.C				
(Name of Foreign I	limited Liability Company; must include "Limit	ed Liability	Company," "L.L.C.," or "LLC.")		
name unavailable, enter alternate na	me adopted for the purpose of transacting business in Fi	orida The ale	emate name must include "Limited Liability Com	pany," "L.L.C," or "LLC	
Delaware		3	83-3056883		
(Jurisdiction under the law of wh	risdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		
Upon qualification					
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration nine penalty l	ability)	*,	
One Main Street			One Main Street		
(Street Address of Principal Office)		0.	(Mailing Address)		
Chatham, New Jersey	07928		Chatham, New Jersey 07928		
		-		. =	
				<u> </u>	
N 1	677 : 1		•••		
Name and street address	s of Florida registered agent: (P.O. Bo	x <u>NOT</u> a	eceptable)		
Name:	Corporation Service Company				
Office Address:	1201 Hays Street		···		
	Tallahassee		32301 , Florida		
	(City)		(Zip code)		

Registered agent's acceptance:

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 application. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Emily Croft

Asst. Vice President

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Preferred Freezer Services Manager Manager Manager Name: Operating, LLC Member Address: ☐ Member Address: One Main Street Authorized Authorized Chatham, New Jersey 07928 Person Person Other Other Other Other____ Manager Manager Address: Member Member Address: Authorized Authorized Person Person ___Other_____ Other_ Other Other Manager Name: ______ Manager Name: _______ Member Address: Member Address: ■Authorized Authorized Person Person __Other____ Other Other____ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. 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. James D. Ray

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "PREFERRED FREEZER SERVICES OF

JACKSONVILLE II, 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 EIGHTEENTH DAY OF

JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PREFERRED

FREEZER SERVICES OF JACKSONVILLE II, LLC" WAS FORMED ON THE TWENTYEIGHTH DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202107016

Date: 01-18-19