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	COVER LETTER
TO: Registration Section Division of Corporations	
SUBJECT:	Perea Holdings LLC. Name of Limited Liability Company
	ign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence co	oncerning this matter to the following:
	Name of Person
	The Medicaw firm Firm/Company
2151	5. Llylune RD #306 Address
<u> </u>	City/State and Zip Code
In-	E-mail address: (to be used for future annual report notification)
For further information concerning	this matter, please call:
	Adams at (305) 444-3484 Contact Person Area Code 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 Please make check payabl	e following amount: e to: FLORIDA DEPARTMENT OF STATE
\$125.00 Filing Fee	S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificat Copy of Status & Certified Copy

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

N COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTEX, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILIT COMPANY TO TRANSACT BUSINENS IN THE STATE OF FLORIDA:
Perea Holdings LLC. (Name of Foreign Limited Liability Company: "LLC." or "LLC.")
Period Holdings & Investments LLC- f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name mass include "Limited Liability Company," "L.L.C. "11")
and the control of th
(Jurisdiction under the law of which foreign limited liability company is organized) 3. Applied For Springer (FEI number, if applicable)
taran da antara da a
(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability.)
(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability.) 12790 Sw 53*9 St (Street Address of Principal Office) (Mailing Address)
Miam; FL, 33/75 Miam; FC, 33/75
. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: The Law Offices of Llax A. Adams ESQ PLIC.
Office Address: 2151 S. Leyeune Road # 306
Cural Gables Florida 33134
Registered agent's acceptance: Idving been named as registered agent and to accept service of process for the above stated limited liability company at the place esignated 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 accept the obligations of my position as registered agent.
(Registered agent's signature)

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: Manager Member Member Authorized Authorized Person Person Other_ Other Other Other_ Name: Ricardo Name: Daniel A Manager Manager Member | Member | Authorized ☐ Authorized Person Person Other Other Other_ Other_ Manager Manager Member Address: Member 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. Signature of an authorized person Lino Perea

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PEREA HOLDINGS 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 NINETEENTH DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "PEREA HOLDINGS LLC" IS A SERIES LIMITED LIABILITY COMPANY.

Section 1

Authentication: 202469602

Date: 03-19-19

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