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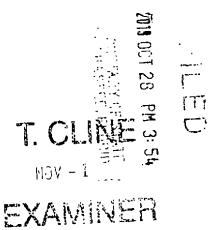
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
-					

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COVER LETTER

TO:

SUBJEC'	Enpack, LLC T:					
	Name of Limited Liability Company					
	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business, and check are submitted to register the above referenced foreign limited liability company to to					
Please ret	urn all correspondence concerning this matter to the following:					
	Jennifer Murphy					
	Name of Person					
	Older Lundy & Alvarez, Attorneys at Law					
	Firm/Company					
	1000 W Cass Street					
	Address					
	Tampa, FL 33606					
	City/State and Zip Code					
	jmurphy@olalaw.com					
	E-mail address: (to be used for future annual report notification)		7018 OCT 28	1		
For furthe	r information concerning this matter, please call:		-P	T		
,	Jennifer Murphy 813 254-8998	漫畫	<u>က</u>	اسب		
-	Name of Contact Person Area Code Daytime Telephon	e Number	. E-			
[E F	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Callahassee, FL 32314 Callahassee, FL 32314 Callahassee, FL 32301					
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE					
_		50.00 Filing Fee	,			

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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

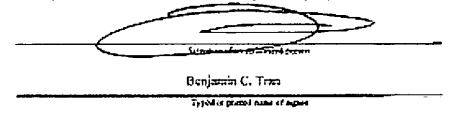
name unavailable, enter alternate i	name adopted for the purpose of transacting b	usiness in Florida. The alterr	nate name must include "Limited Liabilit	y Company," "L.L.C," or "	L1.C.")
Texas			3-4075245		
(Junisdiction under the law of w	hich foreign limited liability company is organ		(FEI number,	it`appheable)	
	(Date first transacted business in Flori	da ut'orior to renstration I			
	(Date first transacted business in Floric (See sections 605 0904 & 605 0905, F	S to determine penalty liab	dity)		
45 Geiger Lane (Street Address of		4 <u>:</u> 6.	5 Geiger Lane		
(Street Address of	Principal Office)		(Mailing Address)	
Warren, NJ 07059		W	/arren, NJ 07059		
				23	_
		_			_
Name and street address Name:	ss of Florida registered agent: (Andrew Teo	P.O. Box <u>NOT</u> acc	eptable)	28 PM 3:54 And OF STATE (SHEEL FLOOD)	
	2919 Center Port Circle			(1) (1) (2)	
Office Address:					
Office Address:	Pompano Beach		33064 , Florida(Zip code)		

8. For initial indexing purposes, the names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) usual):

Title or Canadia:	Name and Address:	Tilk of Capacity:		Nume and Address:		
E Merrifor	Name: flenjamin C. Tran	🍱 Mænger	Namet Alli	ed \$. Teo, \$r.		
Momber Address: 45 Geiger Lane		☐ Member	Address: 2919 Center Port Circle			
Authorized	Warren, NJ 07059	Authorized	Pompano Beach, F1, 33064			
Fernon		Person				
Other		[](xber		□Oxher		
∭Mæager	Name:	Manager	Name:			
Member	Address:	Member	Address: _	<u>N.</u>		
■Authorized		Authorized		<u> </u>		
Ретова		Person		71 28 71 28		
Other	Other			Dog T		
				- S & W		
M2222ger	Nece:	Manager	Name:			
∏ Маа&т	Address:	Meniber	A di ress:			
Authorized		Authorized				
Person		Person		- W-W		
	□Other			□0thar		

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when litting 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 curredy of records in the jurisdiction under the law of which it is organized. (If the certificate is in a feedign language, a translation of the certificate under each of the translator must be submitted)
- 10. This document is executed in accordance with section 605,0203 (1) (b). Florida Squates, 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.



Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for ENPACK, LLC (file number 803260958), a Domestic Limited Liability Company (LLC), was filed in this office on March 11, 2019.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 02, 2019.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Ruth R. Hughs Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 917593330005