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JAN 0.7 2020 T. LEMIEUM CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 121845 4305304

¿\$.

AUTHORIZATION ON

COST LIMIT : \$ 125.00

ORDER DATE : January 3, 2020

ORDER TIME : 9:23 AM

ORDER NO. : 121845-010

CUSTOMER NO: 4305304

FOREIGN FILINGS

NAME: PRIME ENTERPRISES, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62969

EXAMINER:

COVER LETTER

TO:		ration Section n of Corporation	as					
SUBJE		ime Enterprises, L				_		
			Name of Lir	nited Liability	Company			
The end Existent	closed "A ce, and c	application by For heck are submitted	eign Limited Liability Compan d to register the above referenc	y for Authoriz ed foreign lim	ation to Transact Business in Florida, ited liability company to transact busin	" Certificate of ness in Florida.		
Please r	eturn all	correspondence c	oncerning this matter to the fol	lowing:				
		Judah I. Elstein	, Esq.					
			Nam	e of Person		•		
	Hellring Lindeman Goldstein & Siegal, LLP							
	Firm/Company							
		One Gateway C	Center					
	Address							
	Newark, NJ 07102							
			City/State	and Zip Code		•		
		jelstein@hlgslaw	.com					
	•	<u></u>	E-mail address: (to be used for	r future annua	I report notification)			
For furth	her infor	mation concerning	this matter, please call:					
	Moham	nad Barakat	а	305 at (625-4929			
		Name of	Contact Person	Area Code	Daytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tailahassee, FL 32314				STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
			e following amount: le to: FLORIDA DEPARTMI	ENT OF STA	те			
		5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00	Filing Fee & S160.00 Filing is ed Copy of Status & Cert			

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

IN COMPILANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED ILABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Prime Enterprises 11.C.

name unavallable, enter alternate na Delaware		Clasida Tha	alternate name must include "Limited Liability Company," "L.L.C," or "L.
Delaware	aine adopted for the purpose of transacting outsiness in	riunica inca	
		3	59-2289106
(Jurisdiction under the law of wh	nch foreign limited liability company is organized)	· .	(FEI cumber, if applicable)
	(Date lits) transacted business in Florida, if prio (See sections 005 0904 & 605 0905, F.S. to det	r to registration ermine penalty	n) Hability)
16363 NW 49th Aver	nue		16363 NW 49th Avenue
(Street Address of Pr	vincipal Office)	6.	(Mailing Address)
Miami Lakes, FL 330	,		Miami Lakes, FL 33014
	s of Florida registered agent: (P.O. B Mohamad Barakat	ox <u>NOT</u> 8	T 1
Name:		ox <u>NOT</u> :	SUEST DAN -
	Mohamad Barakat	ox <u>NOT</u> :	2020 JAN

Mohamad Barakat

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: Name: Maged Barakat Mohamad Barakat Manager Manager Address: 16363 NW 49th Avenue Address: ____16363 NW 49th Avenue Member Miami Lakes, FL 33014 Miami Lakes, FL 33014 Authorized Authorized Person Person Other____ Other_ Other ____ Other_ Name: Francisco Linares Manager Manager | Name: _____ Address: 16363 NW 49th Avenue Address: ____ Member | ☐ Member Miami Lakes, FL 33014 __Authorized Authorized Person Person Other ____ Other ____ ' Other_ Other ☐ Manager Manager | Name: _____ 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. Mohamad Barakat Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "PRIME ENTERPRISES, 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 SIXTH DAY OF JANUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRIME

ENTERPRISES, LLC" WAS FORMED ON THE THIRD DAY OF JANUARY, A.D.

2020.

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

Authentication: 202121930

Date: 01-06-20