M20000009041

(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:				
M30006882537				
W20000107844				

Office Use Only



500348847475

07/30/20--01004--024 **70.00

09/21/20--01003--002 **55.00

2020 GCT-6 FH 5: 28



COVER LETTER

TO:

TO:	Registration Section Division of Corporations	·	
	PISEC GROUP AMERICA LLC		
SUBJI	ECT: Name	e of Limited Liability Company	•
The en Existe	nclosed "Application by Foreign Limited Liability once, and check are submitted to register the above	Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact busi	" Certificate on ness in Florid
Please	return all correspondence concerning this matter to	o the following:	
	MICHAEL KANTOR		
	Name of Person		
	PISEC GROUP AMERICA LLC		
	Firm/Company		
	80 SW 8TH STREET, SUITE 2157		
	Address		
	MIAMI, FL 33130		
	City/State and Zip Code		
	Mike.Kantor@pisec.com		
	E-mail address: (to be	e used for future annual report notification)	-
For fu	rther information concerning this matter, please ca	11:	
MICHAEL KANTOR		305 810-2828 at ()	
	Name of Contact Person	Area Code Daytime Telephone Number	2020 oc
Mailing Address:		Street Address:	
Registration Section		Registration Section)
	Division of Corporations	Division of Corporations	(S)
	P.O. Box 6327	The Centre of Tallahassee	
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	70
		Tallahassee, FL 32303	ហ្គ
	Enclosed is a check for the following amount:		 C2
	Please make check payable to: FLORIDA DEI	PARTMENT OF STATE	
	■ \$125.00 Filing Fee	ee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee	

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

of the first of the second

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: PISEC GROUP AMERICA LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.") 82-1250133 DELAWARE (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 02/06/2017 (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability.) 80 SW 8TH STREET, SUITE 2157 80 SW 8TH STREET, SUITE 2157 5. (Street Address of Principal Office) (Mailing Address) MIAMI, FL 33130 MIAMI, FL 33130 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) MICHAEL KANTOR Name: 80 SW 8TH STREET, SUITE 2157 Office Address: MIAMI , Florida (City) 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.

(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]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: MICHAEL KANTOR □Manager Name: _____ ■ Manager 80 SW 8TH STREET ☐ Member Address: ______ Address: ■ Member **SUITE 2157** □ Authorized ☐ Authorized MIAMI, FL 33130 Person Person □Other______ □Other____ □Other ______ □Other Name: □Manager Name: _____ □Manager Address: □Member Address: □Member ☐ Authorized □ Authorized Person Person □ Other_____ Other____ □Other □Other □Other □ Name: □Manager □ Manager Address: ____ □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

MICHAEL KANTOR

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "PISEC GROUP AMERICA 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 THIRTIETH DAY OF SEPTEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PISEC GROUP AMERICA LLC" WAS FORMED ON THE SIXTH DAY OF FEBRUARY, A.D. 2017.

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

7171 PT 1-6 Fil 5: 80



Authentication: 203768610

Date: 09-30-20



September 20, 2020

MICHAEL KANTOR 80 SW 8TH ST STE 2157 MIAMI, FL 33130 US

SUBJECT: PISEC GROUP AMRICA LLC

Ref. Number: W20000107844

We have received your document for PISEC GROUP AMRICA LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 020A00017963

RECEIVED OCT 0 6 2020