

M21000007396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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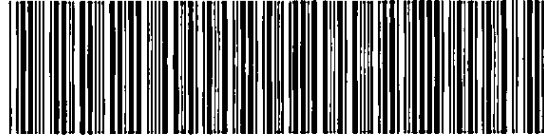
(Business Entity Name)

(Document Number)

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FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED ARTICLES FOR:

FIVE STAR IMPORTS LLC

PLEASE RETURN A CERTIFIED COPY

CHECK# 9007 FOR: \$155.00

THANK YOU!

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:

1. FIVE STAR IMPORTS LLC

(Name of foreign limited liability company; must include "limited liability company," "LLC," or "L.L.C.")

FIVE STAR IMPORTS FLORIDA LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. N/A

(FEI number, if applicable)

4.

(Date first transacted business in Florida, if prior to registration;
(See sections 605.0904 & 605.0905, F.S. to determine priority liability))

5. C/O 8950 SW 74TH CT. SUITE 1901

(Street Address of Principal Office)

Miami, FL 33156

6. C/O 8950 SW 74TH CT. SUITE 1901

(Mailing Address)

Miami, FL 33159

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Atrium Registered Agents, Inc.

Office Address: 8950 SW 74th Ct., Suite 1901

Miami

(City)

Florida 33156

(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.

Atrium Registered Agents, Inc.

(Registered agent's signature)

By: Felipe Frias, VP

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are.

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

MEM

Angel Antonio Santalices Suarez

8950 SW 74th Ct. Ste. 1901
Miami, FL 33156

(Use attachments if necessary)

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)

ANGEL ANTONIO SANTALICES SUAREZ

Typed or printed name of signer

2021 JUN 15 AM 10:20

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIVE STAR IMPORTS 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 TENTH DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIVE STAR IMPORTS LLC" WAS FORMED ON THE NINTH DAY OF JUNE, A.D. 2021.

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



5985018 8300

SR# 20212418850

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 203421284

Date: 06-10-21