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S. HAWKES

APR - : 4021

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Prime Fuels, LLC		
Name of Limited Liability Company		
	y for Authorization to Transact Business in Florida," Certificate of ed foreign limited liability company to transact business in Florida.	
Please return all correspondence concerning this matter to the fol	lowing:	
Daniel Jones		
Name of Person		
Prime Fuels, LLC		
Firm/Company		
106 Langtree Village Drive Suite 301		
Address		
Mooresville, NC 28117		
City/State and Zip Code		
info@primefuelsusa.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Daniel Jones	, 888 680-0407	
Name of 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 following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE		
\$125.00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & S160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy	

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: Prime Fuels, 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." or "L.L.C.") (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605,0905, F.S. to determine penalty liability) 6. 106 Langtree Village Drive 106 Langtree Village Drive (Street Address of Principal Office) Suite 301 Suite 301 Mooresville NC 28117 Mooresville NC 28117 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Northwest Registered Agent LLC Name: 7901 4th St N STE 300 Office Address: St. Petersburg 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.

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: Daniel Jones Manager Manager Name: 106 Langtree Village Drive Suite 301 Address: Member Member Address: _____ Mooresville Authorized Authorized NC 28117 Person Person Other____ Other Other____ Other_ Manager Name: ____ Manager Name: Member Address: Member Address: Authorized Authorized Person Person Other Other Other Other Manager 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. **Daniel Jones**

Typed or printed name of signee



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

PRIME FUELS, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 26th day of May, 2020

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 18th day of March, 2022.

Elaine J. Marshall

Secretary of State