M2300011791

(Re	equestor's Name)					
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W23-105929



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2023 SEP 14 PH 2: 45 SECRETARY OF STATE



August 3, 2023

ALFRED F. ANDREU 700 BILTMORE WAY, SUITE C-1 CORAL GABLES, FL 33134 US

SUBJECT: BENFAM HOLDINGS PR LLC

Ref. Number: W23000105929

We have received your document for BENFAM HOLDINGS PR LLC and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a corporation, but your entity is a llc. Please complete and return the enclosed blank form(s).

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

Letter Number: 923A00017540

Ariel Jones Regulatory Specialist II

COVER LETTER

TO: Registration Section Division of Corporation	s			
SUBJECT: BENFAM Holding	s PR, LLC			
3000EC1.	Name of corporation -	must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Fo "Certificate of Existence," or "Cabove referenced foreign corpor	Certificate of Good Standi	ng" and check are submit		
Please return all correspondence	concerning this matter to	the following:		
Alfred F. Andreu				
	Name of Po	rson		
Alfred F. Andreu, P.A.				
	Firm/Compa	nny		
700 Biltmore Way, Suite C-1				
	Address	3		
Coral Gables, Florida 33134				
	City/State and	Zip code		
alfred@andreu-law.com				
E-ma	il address: (to be used for	future annual report noti	fication)	
For further information concern	ing this matter, please cal	l:		
Noma N Varas	at (445-5223		
Name of Person	Area Code	Daytime Telephor	ne Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sect Division of Corp P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	ORIDA DEPARTMENT C 8.75 Filing Fee & 🔻 🗆 :		\$87.50 Filing Fee, Certificate of Status & Certified Copy	





CERTIFICATE OF GOOD STANDING

I, Omar J. Marrero Díaz, Secretary of State of the Government of Puerto Rico.

CERTIFY: That, pursuant to Puerto Rico's General Law of Corporations, **BENFAM HOLDINGS PR LLC**, register number **468037**, a **for profit domestic** Limited Liability Company organized under the laws of Puerto Rico on **June 28, 2021**, has complied with the payment of its Annual Fees.



IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Government of Puerto Rico, in the City of San Juan, Puerto Rico, today, April 25, 2023.



Omar J. Marrero Díaz Secretary of State

To validate this certificate go to:

https://estado.pr.gov/

This certificate is valid for one (1) year from issue date (Regulation 8688, Art. 26). However, it is subject to faithful compliance with the provisions of Chapter XV and Chapter XXI of Act 164-2009, as applicable.

Certificate Validation Number: 543598-38477424





CERTIFICATE OF EXISTENCE

I, Omar J. Marrero Díaz, Secretary of State of the Government of Puerto Rico,

CERTIFY: That according to our records BENWORTH CAPITAL PARTNERS PR LLC, with registration number 468034, is a domestic for profit limited liability company organized on June 28, 2021.

This certification does not certify that this corporation has filed its annual reports, pursuant to the requirements of the General Corporations Law, as amended. If you need to know if such reports have been filed, you must request a Certificate of Good Standing.



IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Government of Puerto Rico, in the City of San Juan, Puerto Rico, today, July 14, 2023.



Omar J. Marrero Díaz Secretary of State

To validate this certificate go to:

https://estado.pr.gov/

This certificate can be validated an unlimited number of times before its expiration date of 13-Jul-2024.

Certificate Validation Number: 571112-60658469

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:

L BENFAM HOLDINGS					
(Name of Foreign	Limited Liability Company; must include "Limited	l Liabilit	y Company," "L.L.C.," or "ELC.")		
(If name unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	orida. The	alternate name must include "Limited Liabil	lity Company," "L.L.C," o	r "LLC.")
Pueto Rico	hich foreign limited hability company is organized)	3.	66-0982181 (FEI number,		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number,	і парріясавіе)	
October 1, 2021 4.					
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	registration ne penalty	ı.) İrability)		
221 Avenida Ponce de Leon 5		6.	700 Biltmore Way (Mailing Address)		
(Street Address of Principal Office)			(Mailing Address)		
Suite 1401			Suite C-1	·	
San Juan, Puerto Rico	00917		Coral Gables, Florida 33134	2020 SE	
7. Name and street addres	ss of Florida registered agent: (P.O. Box	<u>NOT</u>	acceptable)	2023 SEP 14 SECRETAR FALLAHA	
Name:	Alfred F. Andreu			TARY OF STATE	G
Office Address:	700 Biltmore Way, Suite C-1			FATE	
	Coral Gables		33134 , Florida		
	(City)		(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.

(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]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Alfred F. Andreu Name: Name: _____ □Manager □Manager 700 Biltmore Way, Suite C-1 □Member Address: □Member Address: Coral Gables, Florida 33134 **■** Authorized ☐ Authorized Person Person □ Other____ □Other □Other □Other_____ □Manager Name: _____ □ Manager Name: □Member Address: ☐ Member Address: □ Authorized ☐ Authorized Person Person □Other_____ □Other____ Other_____ □Other____ Name: ____ □Manager Name: _____ □Manager Address: □Member Address: □Member ☐ Authorized ☐ Authorized Person Person □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 \$\frac{1}{8}\$ tate constitutes a third degree felony as provided for in \$.817.155, F.S. Signature of an authorized person

Alfred F. Indreu, Authorized Representative

Typed or printed name of signee