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T. LEMIEUX DEC 17 2024

COVER LETTER

	Registration Sec Division of Cor						
SUBJE	CT: Prism Pro	, INC					
0000	···	Name	of corporatio	n - mu	st include suffix		_
Dear Sir	or Madam:						
"Certific	ate of Existence		of Good Sta	nding'	' and check are sub	ct Business in Florida," mitted to register the	
Please re	eturn all corresp	ondence concerni	ing this matte	r to th	e following:		
Bryon Ja	у						
			Name o	Perso	on .	•	
			Firm/Co	npany			
1245 Nor	rth Fieldlark Land	e					
		** **	Add	ress	· · · · · · · · · · · · · · · · · · ·		
Homeste	ad, Florida 33035	5					
			City/State	and Zi	p code		
bjay305@	gmail.com						
	,	E-mail address	s: (to be used	for fu	ture annual report r	notification)	
For furth	ner information	concerning this n	natter, please	call:			
Bryon Ja	у		305 at (8′	790098		
	Name of Perso	n	Area Co	de	Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Please ma	ake check payabl	the following amo	EPARTMEN			□ \$97.50 Eiling Foo	
⇒ 3/U.U	00 Filing Fee	S78.75 Filin Certificate	_		3.75 Filing Fee & ctified Copy	S87.50 Filing Fee Certificate of Sta Certified Copy	



December 17, 2024

BRYON JAY 1245 N FIELDLARK LN HOMESTEAD, FL 33035

SUBJECT: PRISM PRO, INC Ref. Number: W24000165347

We have received your document for PRISM PRO, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the principal address. You also need to have an officer or director sign the last page of the document.,

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 524A00027420

RECEIVED FEB 0 4 2025

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Prism Pro, INC				
•	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting bus	iness in Florida)	
2. Colorado	y under the law of which it is incorporated)	99-2636105		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4. 12/31/2016	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
6				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150			
2000 South Color	•	2, co 80222		
<i>1</i>		e street address)		
	(Current mailing	; address, if different)		
8. Name and street Name:	et address of Florida registered agent: (P.O. Registered Agents Inc	Box NOT acceptable)	2025 FED -4	
Office Address:	7901 4th St N STE 300		: ::	
	St. Petersburg	, Florida <u>33702</u>	<u> </u>	
	(City)	(Zip code)	02	

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS				
Chairman	Name: Bryon Jay	□ Chairman	Name: Marc Jay	
□Vice Chairman	Address: 1245 N. Fieldlark LN	□ Vice Chairman	Address:	
□Director	Homestead< FL 33035	□Director	Miami, FL 33143	
President		□President		
□Vice President		■ Vice President		
□Secretary	Treasurer	□Secretary	□Treasurer	
Other	Other	□Other	Other	
□ Chairman	Name: 5841 sw 63rd ave	□Chairman	Name: Clarissa Quinones	
□Vice Chairman	Address: Miami, FL 33143		Address:	
Director		□Director		
□President		☐ President		
□Vice President		□Vice President		
Secretary	□Treasurer	Secretary	□Treasurer	
Other	Other	Other	Other	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	·····	□Director		
□President		□President		
□ Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary	Treasurer	
□Other	Other	Other	Other	
Important Notice: individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep	partment of State Annual Re	d for reporting purposes only. Non-indexed port form.	
she is aware that fas.817.155, F.S.	ctor signing this document (and who is listed in a alse information submitted in a document to the L			
17 BRYON	J. JMY			

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

PRISM PRO, INC.

is a

Corporation

formed or registered on 12/31/2016 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20161892395.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/12/2024 that have been posted, and by documents delivered to this office electronically through 11/12/2024 @ 09:33:05.

1 have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 11/12/2024 @ 09:33:05 in accordance with applicable law. This certificate is assigned Confirmation Number 16559181



Secretary of State of the State of Colorado

***End of Certificate*

Notice: A certificate issued electronically from the Colorudo Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, https://www.coloradosos.gov/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, https://www.coloradosos.gov/click"Businesses, trademarks, trade names" and select "Frequently Asked Questions."