# F10000002063

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



300179910813

05/03/10--01022--002 \*\*87.50

RECEIVED



THINGIR MAY O 4 2010

### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

JS5	Professionals
South,	Fnci
- (	

		Art of Inc. File			
		LTD Partnership File		•	
	•	Foreign Corp. File	_		
		L.C. File			
ļ		Fictitious Name File			
	<del></del>	Trade/Service Mark			
		Merger File			
		Art. of Amend. File			
,		RA Resignation	SEC	2010	
		Dissolution / Withdrawal	<u> </u>	3	18
Ì		Annual Report / Reinstatement	À	<del>ا</del> ا	
	<u> </u>	Cert. Copy	OF	<u></u>	'n
	<del></del> 7	Photo Copy	C/2	ά	J
		Certificate of Good Standing	7	5	
ļ		Certificate of Status	_		
		Certificate of Fictitious Name			-
		Corp Record Search			
		Officer Search			
		Fictitious Search			
-		Fictitious Owner Search			
		Vehicle Search			
		Driving Record			
		UCC 1 or 3 File			
		UCC 11 Search			
	t .				

Signature

Name

. 1

Requested by:

Date

#### 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.

	lable in Florida, enter alternate corporate name adopted for the purpose of transacti	- <del>-</del>	
Pe	under the law of which it is incorporated)  3. 27-2334244  (FEI number, if apple)		
tate or country	under the law of which it is incorporated) (FEI number, if app	olicable)	
4	1/13/2010 5 Persetus L	Personal -	
(Date of incorporation)  5. Perpetus L  (Duration: Year corp. will cease to exist or "perp		o exist or "perpetual")	
	MAY 2010		
	(Date first transacted business in Florida, if prior to registration)		
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liabil	ity)	
	ZZ16 SW S8 AVENUE - WESTPARK FL	33053	
	(Principal office address)		
	PO 130x 90310 Allentown 79 18109		
	7,700		
	(Current mailing address)		
	(Current mailing address)	1	
		201 TALI	
(Purpose(s	(Current mailing address)  Conduct Services for Local Cleants s) of corporation authorized in home state or country to be carried out in state of Fl	SECRE Orida) AH	
	Conduct Services for Local Clients s) of corporation authorized in home state or country to be carried out in state of Fl	2010 HAY SECRETA TALLAHAS	
	Conduct Services for Local Cleants s) of corporation authorized in home state or country to be carried out in state of Flet address of Florida registered agent: (P.O. Box NOT acceptable)	2010 HAY -3 SECRE 1ARY TALLAHASSE	
	Conduct Services for Local Cleants s) of corporation authorized in home state or country to be carried out in state of Flet address of Florida registered agent: (P.O. Box NOT acceptable)	AY -3 EJARY HASSEE	
Name and <u>stree</u> Name:	Conduct Services for Local Cleants s) of corporation authorized in home state or country to be carried out in state of Flet address of Florida registered agent: (P.O. Box NOT acceptable)	AY -3 EJARY HASSEE	
Name and <u>stree</u> Name:	Conduct Services for Local Cleants s) of corporation authorized in home state or country to be carried out in state of Flet address of Florida registered agent: (P.O. Box NOT acceptable)	AY -3 AM 9: BIARY OF STA HASSEE, FLOR	
Name and <u>stree</u>	Conduct Services for Local Clients s) of corporation authorized in home state or country to be carried out in state of Fl	AY -3 EJARY HASSEE	

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)

11. 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.

• • •			
12. Names and	business addresses of officers and/or directors:		
A. DIRECTOR	RS		
Chairman:			
Address:		· ·	
B. OFFICERS			
	Joshua S. Gamez		
Address:	PO BOX 90310 - 1701 UNIAN BIVE.	2010 MAY SECRETA ALLAHAS	
	Allentoun Pa 18109	HAS	
Vice President: _	HOLAN C GUANPAS	-3 SEE	Γ
Address:	PO BOX 9070 - 1701 UNEON BIVD.	FIG.	111
	Allentown Pa 18109	9: 5 NATE ORID.	
Secretary:	Joshua S. Gamez	7	
Address:	70 Ben 90310 - 1701 UNEW BIXA. Allentown	P4 18109	
Treasurer:	Joshua S. Gamez		
	PO Box 90310 - 1701 UNEON DIVD Allewform Pa	18169	
Address:			
NOTE: If neces	ssary, you may attach an addendum to the application listing additional officers	and/or directors.	
13			
-1110-12-3	(Signature of Director or Officer fisted in number 12 of the application)		
14	Joshua S. GAMEZ Aresident		
	(Typed or printed name and capacity of person signing application)		

## Delaware

PAGE

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JSG PROFESSIONALS SOUTH, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF APRIL, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JSG PROFESSIONALS SOUTH, INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF APRIL, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

ZOID MAY -3 AM 9: 57
TALLAHASSEE, FLORIDA

4810858 8300

100442052

AUTHENTICATION: 7962983

DATE: 04-29-10

You may verify this certificate onlin at corp.delewere.gov/authver.shtml