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Special Instructions to Filing Officer:

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EXAMINER

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CORPDIRECT AGE 515 EAST PARK AV TALLAHASSEE, FL 222-1173	ENUE	merly CCRS)					
FILING COVER ACCT. #FCA-14	SHEET						
CONTACT:	KATIE WO	<u>ONSCH</u>					
DATE:	10/02/2012						
REF. #:	RA2680.173	684					
CORP. NAME:	<u>1848 JSSI P</u>	ARTNERS LLC					
() ARTICLES OF INCO	ORPORATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION				
() ANNUAL REPORT		() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME				
(XX) FOREIGN QUAL	IFICATION	() LIMITED PARTNERSHIP	() LIMITED LIABILITY				
() REINSTATEMENT		() MERGER	() WITHDRAWAL				
() CERTIFICATE OF () OTHER:	CANCELLATION	ı					
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Examiner's Initials

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1. 1848 JSSI Partners LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "I	JLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Li Company," "L.L.C," "LLC.")	copy of th mited Lial	e written pility
2. Delaware 3. 26-4414044		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		6 ~>
4. May 22, 2008 5. Perpetual		112
(Date of Organization) (Duration: Year limited liability company wexist or "perpetual")	ill cease to	<u>-</u>
6. Upon Qualification	\$9. ₹	2
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	er s	至三
7. 1221 Brickell Avenue, Suite 2660, Miami, Florida 33131	25	≘ (
	7× (1)	.
(Street Address of Principal Office)		_
8. If limited liability company is a manager-managed company, check here		
9. The name and usual business addresses of the managing members or managers are as follow	vs:	
Managing Member - 1848 Capital Partners LLC, 1221 Brickell Avenue, Suite 2260, Miami,	FL 331	3.1
		_
		-
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having of	netody of	ecords in
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign		
translation of the certificate under oath of the translator must be submitted.)		
11. Nature of business or purposes to be conducted or promoted in Florida:		_
Any lawful business permitted by the laws of the State of Florida.		
AND A		
Signature of a member or an authorized representative of a member.		
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under		
penalties of perjury that the facts stated herein are true. I am aware that any false information submitted document to the Department of State constitutes a third degree felony as provided for in s.817.1	55, F.S.)	
Joseph E. DaGrosa, Jr., as authorized representative	•	
Typed or printed name of signee		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Lin	nited Liability Com	ipany is:		
1848 JSSI Partners	LLC			
If unavailable, the alter	mate to be used in the	he state of Florida is:	SEC FACL	
2. The name and the F	MIZOCT -2	7		
N	IRAI Services, Inc	; .		m
		(Name)	STATE COMME	0
5	15 East Park Aver	nue	J. J.	
	Florida Street Ad	idress (P.O. Box NOT ACCEPTABLE)	_	
T	allahassee	FL 32301		
		City/State/Zip		

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

NRAI Services, Inc., as Registered Agent

By: Katu Wow ASSI - Sec
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "1848 JSSI PARTNERS 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 FIRST DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "1848 JSSI
PARTNERS LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF MAY, A.D.
2008.

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

4551107 8300

121087346

AUTHENTICATION: 9885225

DATE: 10-01-12

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