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NAME: JSDN COMPANY, LLC

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AUTHORIZATION: ABBIE/PAUL HODGE

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

	imited Liability Company; must include "Limit	•					
: unavailable, enter alternate na	me adopted for the purpose of transacting business in Fl	orida The alter	nate name must in	nclude "Limited Liabil	hty Company," "L.!	L.C," or "LLC	C.")
GEORGIA			77.	- 278	1701		
	ich foreign hranied hability company is organized)	3	<u> </u>	O'El number	r, if applicable)		-
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204 HOUSTON MI	LL ROAD	•					
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Name:	SCOTT M. PRICE, ESQUIRE MATEER & HARBERT, P.A.		eceptable)		MS See See SE	2921 ETT 16 MH 9: C	1
Name:	SCOTT M. PRICE, ESQUIRE MATEER & HARBERT, P.A.		eceptable)	ida <u>32801</u>	THE STATE	2921 ETC 16 AH 9: 00	

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: JARRETT E. SHADDAY Name: Manager Name: Manager 204 HOUSTON MILL ROAD Address: Member Member Address: ROME, GEORGIA 30161 Authorized Authorized Person Person Other____ Other_____ Other_ Other Name: _____ Manager Manager DON NEWTON Name: ____ Manager 204 HOUSTON MILL ROAD Address: ________ Member | Member ROME, GEORGIA 30161 Authorized ___Authorized Person Person Other____ Other_ Other _____ Other_ Name: _____ Manager Name: _____ Manager Address: Member Member Address: ______ Muthorized 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. Signature of an authorized person

JARRETT E. SHADDAY

Lyped or printed time of signee

Control Number: 10004520

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

JSDN COMPANY, LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Docket Number : 22125629 Date Inc/Auth/Filed: 01/20/2010 Jurisdiction : Georgia Print Date : 12/16/2021

Form Number : 211



Brad Rafforsperger

Brad Raffensperger Secretary of State