

M23000007532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

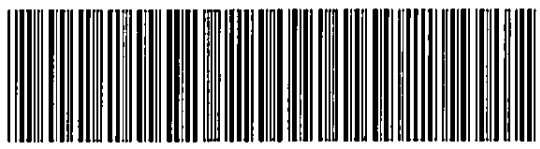
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
W23-58645

Office Use Only



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08/13/23--01007--010 \*\*06.25

06/08/23--01002--016 \*\*58.75

2023 JUN 22 AM 9:10

JUN 09 2023  
K. Brumbly



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 22, 2023

ANN MILLER-JORDAN  
228 N. MENARD AVE.  
CHICAGO, IL 60644

SUBJECT: AMJ PROPERTY GROUP LLC  
Ref. Number: W23000058645

We have received your document for AMJ PROPERTY GROUP LLC and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you have submitted cannot be filed by an LLC. If you are trying to register your LLC to do business in Florida then please fill out the enclosed application and return with a check or money order for an additional \$58.75.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

KYLE D BRUMBLEY

**RECEIVED**

**MAY 22 2023**

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AMJ Property Group LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Ann Miller-Jordan  
Name of Person

AMJ Property Group LLC  
Firm/Company

228 N. Menard Ave  
Address

Chicago, IL 60644  
City/State and Zip Code

annmillerjordan@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ann Miller-Jordan at ( 847 ) 942-6301  
Name of Contact Person Area Code Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. AMJ Property Group LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

AMJ PG 101 LLC  
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. South Dakota  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 92-2236329  
(FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. c/o IRA Financial  
(Street Address of Principal Office)

1691 Michigan Ave  
Suite 338  
Miami Beach, FL 33139

6. 228 N. Menard Ave  
(Mailing Address)

Chicago, IL 60644

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: c/o Ann Miller-Jordan  
IRA Financial

Office Address: 1691 Michigan Ave  
Suite 338  
Miami Beach, Florida 33139  
(City) (Zip code)

2025 MAY 22 11:09:50

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.

[Signature]  
(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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Ann Miller-Jordan</u>	<input type="checkbox"/> Manager	Name: <u>IRA Financial</u>
<input type="checkbox"/> Member	Address: <u>228 N. Menard Ave</u>	<input checked="" type="checkbox"/> Member	Address: <u>5024 South Bur Oak Pl.</u>
<input type="checkbox"/> Authorized Person	<u>Chicago, IL 60614</u>	<input type="checkbox"/> Authorized Person	<u>Suite 200</u> <u>Sioux Falls, SD 57108</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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

Ann Miller-Jordan

5/16/23

Typed or printed name of signee

# State of South Dakota

Office of the Secretary of State

## Certificate of Good Standing

Domestic Limited Liability Company

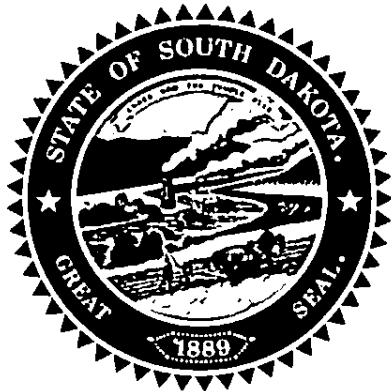
I, Monae L. Johnson, Secretary of State of the State of South Dakota, hereby certify that

**AMJ Property Group LLC**

Business ID: DL243872

was authorized to transact business in this state on: February 7, 2023.

I, further certify that **AMJ Property Group LLC** has complied with the laws of this State relative to the formation of Certificate of Good Standing/Authorizations of its kind and is now regularly and properly organized and existing under the laws of this State and is in Good Standing, as shown by the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of its financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, May 17, 2023.

*Monae L. Johnson*

Monae L. Johnson  
Secretary of State

05/17/2023 11:43 AM

Verification #: 016600920