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#### **COVER LETTER**

TO:	: New Filing Section Division of Corporations		
orm:	•		
20R	BJECT: ROD JACKSON & ASSOCIATES, INC.  Name of corporation - must	st include suffix	
	•	w morago sarra	
Dear :	r Sir or Madam:		
"Certi	enclosed "Application by Foreign Corporation for Authoritificate of Existence," or "Certificate of Good Standing" ve referenced foreign corporation to transact business in	and check are sub-	t Business in Florida," mitted to register the
Please	ase return all correspondence concerning this matter to the	following:	
ANN	JACKSON		
	Name of Person	1	
ROD .	JACKSON & ASSOCIATES, INC.		
	Firm/Company		
6469	9 PINION STREET		
	Address		
0377	, many		
OAK	City/State and Zip	code	
	•	, , , , , , , , , , , , , , , , , , , ,	
roaj	ijassoc@aol.com E-mail address: (to be used for fut	ure annual report n	otification)
For fi	further information concerning this matter, please call:	·	·
ANN .	JACKSON at (818)991-968	4	
		& Daytime Telepho	ne Number
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl	ction rporations
Encio	closed is a check for the following amount:		
<b>83 \$</b> 7		.75 Filing Fee & tified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

# 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.

	RJA, INC.	
	(If name unavailable in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting business in Florida)
2.		3. 95-4411685
	(State or country under the law of which it is incorporated)	(FEI number, if applicable)
ŧ.	JANUARY 25, 1993	5. PERPETUAL
	(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
5.		1
		s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)
·_	6469 PINION STREET, OAK PARK, CA 91377	
	(Principal office a	iddress)
	6469 PINION STREET, OAK PARK, CA 91377	75 mi
	(Current mailing a	ıddress)
		型区 ~
ì.	Name and street address of Florida registered agent: (I	P.O. Box NOT acceptable)
3.	Name and street address of Florida registered agent: (I	P.O. Box NOT acceptable)
		P.O. Box NOT acceptable)
	Name: James Jackson	P.O. Box NOT acceptable)

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. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Rod Jackson
Address: 6469 Pinion Street
Oak Park, CA 91377
Vice Chairman:
Address:
Director: Ron Holbert
Address: 73008 Willow Street
Palm Desert, CA 92260
Director: Jeffrey Jackson
Address: 6469 Pinion Street
Oak Park, CA 9/1377
B. OFFICERS
President: Rod Jackson
Address: 6469 Pinion Street
Oak Park, 4 91377
Vice President: Ann Jackson
Address: 6469 Pinion Street
Oak Park, CA 01377
Secretary: Ann Jackson
Address: 6469 Pinion Street, Oak Porte, CA 91277
Treasurer: Ann Jackson
Address: 6469 Pinion Street Oak Park, CA 91377
NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors.
12.
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein
are true and that he or she is aware that 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.
13. And Jackson (Typed or printed name and capacity of person signing application)

#### State of California

#### Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

ROD JACKSON & ASSOCIATES, INC.

FILE NUMBER:

C1718968

FORMATION DATE:

01/22/1993

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 07, 2015.

ALEX PADILLA Secretary of State



#### State of California Secretary of State

Statement of Information

(Domestic Stock and Agricultural Cooperative Corporations)
FEES (Filing and Disclosure): \$25.00.
If this is an amendment, see instructions.

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

ROD JACKSON & ASSOCIATES, INC.

6469 PINION STREET OAK PARK CA 91377

### E-T57969 FILED

In the office of the Secretary of State of the State of California

Aug - 01 2013

2. CALIFORNIA CORPORATE NUMBER C1718968	· · · · · · · · · · · · · · · · · · ·	This Spa	ce For Filing Use Only
No Change Statement ( Not applicable if agent address of record is a P.	.O. Box address. Se	e instructions.)	
3. If there have been any changes to the information contained in the last State, or no statement of information has been previously filed, this form reached in the last State, the last been no change in any of the information contained in the last State check the box and proceed to Item 17.	must be completed in	its entirety.	
Complete Addresses for the Following (Do not abbreviate the name of	the city. Items 4 an	d 5 cannot be P.O. Boxe	S.)
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE 6469 PINION STREET OAK PARK CA 91377	CITY	STATE	ZIP CODE
5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA IF ANY 6469 PINION STREET OAK PARK CA 91377	CITY	STATE	ZIP CODE
6. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 4	CITY	STATE	ZIP CODE
Names and Complete Addresses of the Following Officers (The corporation in be added, however, the preprinted titles on this form must not be altered.)	nust list these three off	icers. A comparable title fo	r the specific officer may
7. CHIEF EXECUTIVE OFFICER/ ADDRESS ROD JACKSON 6469 PINION STREET OAK PARK CA 91377	CITY	STATE	ZIP CODE
8 SECRETARY ADDRESS ANN JACKSON 6469 PINION STREET OAK PARK CA 91377	CITY	STATE	ZIP CODE
9. CHIEF FINANCIAL OFFICER/ ADDRESS ANN JACKSON 6469 PINION STREET OAK PARK CA 91377	CITY	STATE	ZIP CODE
Names and Complete Addresses of All Directors, Including Directors Who All Attach additional pages, if necessary )	re Also Officers (The	corporation must have at le	east one director.
10. NAME ADDRESS  JEFFREY A JACKSON 6469 PINION STREET OAK PARK CA 913	CITY 377	STATE	ZIP CODE
11. NAME ADDRESS ROD JACKSON 6469 PINION STREET OAK PARK CA 91377	CITY	STATE	ZIP CODE
12 NAME ADDRESS RON HOLBERT 73008 WILLOW STREET PALM DESERT CA 92	CITY 260	STATE	ZIP CODE
13. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:			
Agent for Service of Process If the agent is an individual, the agent must resaddress a P.O Box address is not acceptable. If the agent is another corporational contificate pursuant to California Corporations Code section 1505 and Item 15 must NAME OF AGENT FOR SERVICE OF PROCESS.	ion, the agent must ha		
RONALD G HOLBERT			
15 STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN IN 73008 WILLOW STREET PALM DESERT CA 92260	NDIVIDUAL CITY	Y STATE	ZIP CODE
Type of Business  18. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION  CONSTRUCTION			
17. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETAL CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT 08/01/2013 ANN JACKSON	ARY OF STATE, THE CO		INFORMATION
DATE TYPE/PRINT NAME OF PERSON COMPLETING FORM		TITLE	SIGNATURE
SI-200 (REV 01/2012)	2	APPROVED BY	SECRETARY OF STATE

## State of California **Secretary of State**

E-T57969

STATEMENT OF INFORMATION (Domestic Stock and Agricultural Cooperative Corporations)

FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLET	TING THIS FORM	This Space For Filing Use Only
CORPORATE NAME	**	T
ROD JACKSON & ASSOCIATES, INC.		<u>[</u>
•		
CALIFORNIA CORPORATE NUMBER C1718968		
RECTORS LIST CONTINUED		
AMES AND COMPLETE ADDRESSES OF ALL DIRECTORS, INCL	LIDING DIRECTORS WHO ARE A	I SO DEFICERS (The cornoration
ust have at least one director. Attach additional pages, if necessary.	)	LSO OFFICERS (The corporation
NAME ADDRESS	CITY AND STATE	ZIP CODE
ANN JACKSON 6469 PINION STREET OAK PARK CA 91377	CITANDSIAIE	ZIF GODE
THE SACROON STORY INCH STREET SARTAIN GASTON	•	
NAME ADDRESS	CITY AND STATE	ZIP CODE
EFRREY A JACKSON 6469 PINION STREET OAK PARK CA 9	1377	
		•
		•
•		