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To:

Division of Corporations

; (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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# FLORIDA/FOREIGN LP/LLLP JMEG, L.P.

Certificate of Status	0	
Certified Copy	0	
Page Count	98 1	
Estimated Charge	\$1,000.00	

J. SAULSBERRY EXAMINER

OCT 11 2013

Electronic Filing Menu

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### COVER LETTER

Division of Corporations	
SUBJECT: JMEG, LP.	
Name of Foreign Limited Partnership or Limited Liability Limited Perinership	
The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or lipartnership to transact business in Plorida.  Please return all correspondence concerning this matter to:	imited liability limited
LARRY LINDEMANN	
TMEG, LY.	
13995 DEPLOMAT DR. #400	
FARMERS BRANCH, TX 75234	
City, State and Zip Code	
LARRY. LINDEM ANN @ JMESCP. COM E-mail address: (to be used for future annual report notification)	2013  TALLI
. For further information concerning this matter, please call:	000
LARRY LOUDEMANN at 972, 590 - 5565 Name of Contact Person Area Code and Daytime Telephone Number	
Enclosed is a check for the following amount:	
CI \$1,000.00 Filling Fees (\$51,008.75 Filling Pees (\$965 Filling Fee and S35 Registered Agent Fee)  CI \$1,000.00 Filling Fees (\$1,008.75 Filling Pees and Certified Copy and Certified Copy and Certified Copy and Certificate of Status	STATE TOWN
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P. O. Box 6327 Tallahassee, FL 32301	

#### Application by foreign limited partnership or Limited Liability Limited partnership To transact risiness in Hodida

_ TO TRANSACT	r Business in Florida	
1. JMEG.LP. (Name of Limited Fartnership or Limited Liability Limited Partnership, which must include suffic) Acceptable Limited Partnership suffices: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffices: Limited Liability Limited Partnership, L.L.P. or LLLP.		
If name unavailable, name under which the limited partnersh business in Florida;	hip or limited liability limited pertnership prop trust contain acceptable suffix.	oses to register to transact
2. TEXAS State or Country of Formation	3 11/12/2002	<del></del>
4. Federal Employer Identification Number <u>R3</u>	0511729	
5. Name of Registered Agent for Service of Process and Flo		
C T Corporation System		
1200 South Pine Island Read		
Plantation, Florida 33324		
7. Principal Office:  13995 DEPLOMAT DR. #400	Em A Social Soci	
9. If limited partnership is a limited limbility limited partn	• • •	
10. Name, principal office address, and mailing address of		27 1
Name of General Partner: RAY NAT 26P.		
Street Address: (3995 DEPLANTA)R. # 40		<del></del>
FARMERS BRANCH, TO 73	5284	
Mailing Address: [3995 DEFLAMAT] P. # 400	Mailing Address:	
FARMERS BRANCH TX 75	234	
Name of General Partner:	Name of General Partner:	
Street Address:	Street Address:	
Mailing Address:	Mailing Address:	

Name of General	Page 1 of 2 Partner:Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
1). Bifective date, if (Effective date cannot	other than the data of filing:  the prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
	ificate of existence duly authenticated, not more then 90 days prior to the delivery of this application to the if State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under organized.
Signed this	STE day of Oct Jan 20 13
	Signature of a general partner g this document affirm that the facts stated herein are true and the individual is aware that false information
	g this document affirm that the facts stated herein are true and the individual is aware that false information ent to the Department of State constitutes a third degree follows a provided for in 6.817.155, P.S.

Page 2 of 2

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$2.75

Filing Fees: Certified Copy (optional): Certificate of Status (optional):

FLD47 - 13/31/2016 Webers Khorer Outlan

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



John Steen Secretary of State

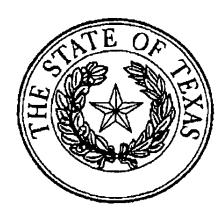
# Office of the Secretary of State

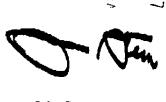
### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Limited Partnership for JMEG, L.P. (file number 800142039), a Domestic Limited Partnership (LP), was filed in this office on November 12, 2002.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 09, 2013.





John Steen Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.tx.us/ Pax: (512) 463-5709

TID: 10264

Diai: 7-1-1 for Relay Services Document: 508254660005