

F000000004993

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JFT Group Holdings, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Tim McFadden
(Name of Person)
~~THE GREAT HOLDINGS, INC.~~ (TM)
(Firm/Company)
114 MAGNOLIA ST
(Address)
Celina, Ohio 45822
(City/State and Zip code)
000003380300--8
-09/01/00--01066--002
*****87.50 *****87.50

For further information concerning this matter, please call:

Tim McFadden at (419) 586-8559
(Name of Person) (Area Code & Daytime Telephone Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STREET ADDRESS:

Name	Registration Section
Availability	Division of Corporations
Document Examiner	409 E. Gaines St. Tallahassee, FL 32399 DCC
Updater	Enclosed is a check for the following amount: DCC
Updater Verifier	<input checked="" type="checkbox"/> \$70.00 Filing Fee DCC
Acknowledgment	DCC
W. P. Verifier	DCC

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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**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.

1. JFT Group Holdings, Incorporated
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. DELAWARE 3. N/A
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4-12-00 5. UNKNOWN
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. June 2000
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 10200 201 North DuPont
(Principal office address)

NEW CASTLE DE 19720
(Current mailing address)
AND OR

8. Purchase (For closed) Properties TO Be Fixed up & re-sold or leased.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: TIM McFADDEN

Office Address: 10200 TURKEY LAKE ROAD, UNIT #154
ORLANDO, Florida 32819
(City) (Zip code)

10. 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.

Tim McFadden (Registered agent's signature) 8-28-00

11. 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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Timothy McFadden - Sole Director

Address: 114 Magnolia ST
Celina Ohio 45822

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Timothy McFadden - Sole officer

Address: 114 Magnolia ST
Celina, Ohio 45822

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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TALLAHASSEE, FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Timothy McFadden 8-28-00
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Timothy McFadden, President/ceo
(Typed or printed name and capacity of person signing application)

State of Delaware
Office of the Secretary of State PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JFT GROUP HOLDINGS INCORPORATED" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF APRIL, A.D. 2000. —

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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04-15-00



Edward J. Freel
Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE: