# F0700003690

(Requ	estor's Name	)			
(Address)					
(Addre	ess)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Busin	ess Entity Na	ime)			
(Document Number)					
Certified Copies	Certificate	es of Status			
Special Instructions to Fili	ng Officer:				
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Office Use Only



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07 JUL 23 PH 1: 30 SECRETARY OF STATE

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#### **COVER LETTER**

TO:	New Filing Section Division of Corporations			
SUBJ	ECT: Juday Properties Inc.			
		oration - m	ust include suffix	
Dear S	ir or Madam:			
"Certif	closed "Application by Foreign Corporation in Corporation in Existence," and check are submitted to business in Florida.			
Please	return all correspondence concerning this i	matter to the	following:	
Jaso	on Juday			
	(Na	me of Perso	n)	
Juda	ay Prpoerties Inc.			
	(Fir	m/Company	<b>'</b> )	
5776	6-51 Grape Rd #288,			
		(Address)		
Mish	awaka, IN 46545			<i>i</i> * - * .
	(City/	State and Zi	p code)	A section of the sect
For fur	ther information concerning this matter, pl	ease call:		
Jaso	n Juday at ( 8	13 , 4	65-2189	
	(Name of Person) (A	Area Code &	& Daytime Telep	hone Number)
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A New Filing S Division of C P.O. Box 63 Tallahassee,	Section Corporations 27
Enclos	ed is a check for the following amount:			
<b>\$7</b> 0.	00 Filing Fee \$\ \tag{Certificate of Status}		'5 Filing Fee & ified 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.

1. Juday Properties Inc.					
(Enter name of corporation; must include "INCORPORATI" Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ΈD,	" "COMPANY," "CORPORATION,"			
L&H Porperties					
(If name unavailable in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting busin	ess in Flor	ida)	
<sub>2.</sub> St. Joseph Co, Indiana	3.				
(State or country under the law of which it is incorporated)		(FEI number, if applicable)			
<sub>4.</sub> 9/15/1998	5.	30 years			
(Date of incorporation)		(Duration: Year corp. will cease to exist o	r "perpetua	al")	
<sub>6.</sub> 8/1/2007					
(SEE SECTIONS 607.1501 & 60 7. 5954 Jaegerglen, Lithia, FL 33547.		502, F.S., to determine penalty liability) ress)			
5776-51 Grape Rd #288, Mishawaka	a, I	N 46545.			
(Current mailing  3. We have moved to Florida.	add	ress)	SECRET	p7 JUL 2	
(Purpose(s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)	路到	<del>- 6</del> 3	
9. Name and street address of Florida registered agent: (	(P.C	D. Box NOT acceptable)	æ. Luc	<u> </u>	C
Name: Jason Juday			STATE ORID	PH 1:38	
Office Address: 5954 Jaegerglen,			⊅'''	1,41	
Lithia,		, Florida 33547			
(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.

(Registered agent's signature)

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.

12. Names and business addresses of officers and/or directors:	O7.J
A. DIRECTORS	JIIIL 2
Chairman:	SSE J
Address:	FLORING 3
Vice Chairman:	Sml m
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS  President: Jason Juday	
Address: 5954 Jaegerglen, Lithia, FL 33547.	
Vice President: Sheryl Juday	
Address: 5954 Jaegerglen, Lithia, FL 33547.	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addondum to the application listing additional officers	and/or directors.
12/06/0	
(Signature of Director or Officer listed in number 12 of the application)  Jason Juday, President	

(Typed or printed name and capacity of person signing application)

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE



To Whom These Presents Come, Greeting:

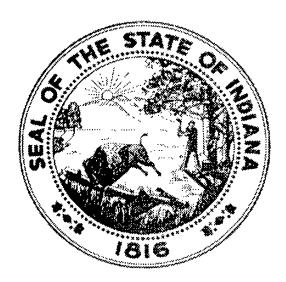
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

#### JUDAY PROPERTIES, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on September 21, 1998, and was in existence or authorized to transact business in the State of Indiana on July 09, 2007.

I further certify this For-Profit Domestic Corporation has not filed its most recent report required by Indiana law with the Secretary of State and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Tenth Day of July, 2007.

TODD ROKITA, Secretary of State