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COVER LETTER

TO: New Filing Division of	Section Corporations				
SUBJECT:	JEDSON	СМ	INC.		
				include suffix	
Dear Sir or Madam:	;				
"Certificate of Exis-	lication by Foreign Cotence," or "Certificate oreign corporation to t	e of Goo	d Standing":	and check are sub	ct Business in Florida," omitted to register the
Please return all cor	rrespondence concern	ing this i	matter to the	following:	
	ANGELA	HA	LNE TT		
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	U E-mail address	s: (to be	used for fulu	re annual report	notification)
For further informa	tion concerning this r	natter, pl	ease call:		
4 .					
HABELA HA	erson	at (_ 5	/3)	965 - 720	on a Number
name of P	erson	4	Area Code &	Daytime Teleph	one Number
STREET/O	COURIER ADDRES	SS:		MAILING A	DDRESS:
New Filing Section New Filing Section					
Division of Clifton Bui	Corporations			Division of Corporations P.O. Box 6327	
2661 Execu	e, FL 32301			Tallahassee, FL 32314	
Enclosed is a check	for the following am	ount:		,	
\$70.00 Filing Fe	ee 🗇 \$78.75 Filin Certificate			75 Filing Fee & fied 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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. 26 - 3910418

(FEI number, if applicable) 4. 10-28-08 5. PERIFTUAL (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Du Pout Circle Hilpord OH 45150
(Principal office address) Du PONT CIRCLE HILFORD OH 45150 (Current mailing address) CONSTRUCTION MANAGEMENT SERVICES (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 NOT acceptable) EMMETT ANDERSON Name: 8657 BAYPINE AD BLDG 5 Office Address: JACKSONVICLE, Florida 32256 (City), Florida (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 further agree to comply with the provisions of all statutes relative to the proper and complete performance of my

designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I duties, and I am familiar with and accept the obligations of my position as registered agent.

(1/11/13

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: A: DIRECTORS Chairman: ANTHONY EDMONDSON Address: 5300 Du Pout CIRCLE KILFORD ONIO 45150 Vice Chairman: Address: ___ Director: Address: **B. OFFICERS** President: GLENN SIMMONS Address: 1000 TOWNE CENTER BLVD BLDG. 800 SAVANNAN GA. 3/322 Mulony Circle MILFORD ONIO 45:50 Secretary: ROZDT BUECNNET Address: 105 E. 9# ST. CWA. ONIO 45202 Treasurer: Address: **NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. 14. ANGELA HARNETT CFO

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

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show JEDSON C.M., INC., an Ohio corporation, Charter No. 1815059, having its principal location in Cincinnati, County of Hamilton, was incorporated on October 28, 2008 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 8th day of November, A.D. 2013.

Ohio Secretary of State

Validation Number: 201331200659