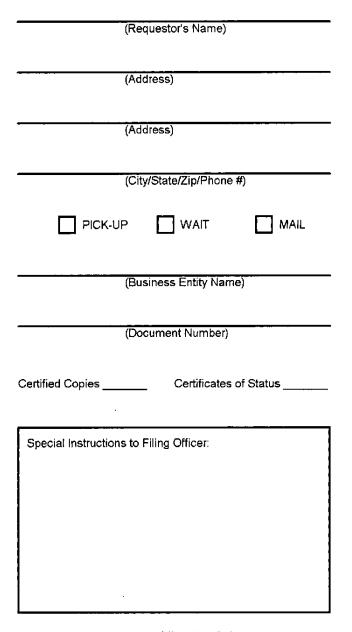
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13 DEC 19 AM 9: 16
SECRETARY OF STATE

DEC 1 9 2013 M. SOLOMON

13 DEC 19 AM 9: 16 SUCRETARY OF STATE FALLAHASSEE, FLORID.

COVER LETTER

TO:	New Filing Se							TATE ORID	91.6
	Division of Co	•						I>	,
SUBJ	ЕСТ:	She	1/21	<u>ز</u>	ENt	er prices	INC		
			Name of	corporat	ion - must	include suffix			
Dear S	ir or Madam:								
"Certif		ce," or "Ce	rtificate o	f Good S	tanding"	rization to Trans and check are su lorida.			
Please	return all corres	pondence c	oncerning	g this ma	tter to the	following:			
			Sesse	\	A WIPC				
				Name	A Mega of Person		V./7 A.d/.		
			Shel	ley	J	Enterpeig	es In	C.	
				Firm/C	ompany				
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For fur	ther information	concerning	g this mat	ter, pleas	e cali:				
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	Name of Perso		81	Are	a Code &	Daytime Telepl	hone Numbe	r	
	STREET/COUNTY New Filing Second Color of Color Buildin 2661 Executive Tallahassee, FI	tion rporations g : Center Ci				MAILING A New Filing S Division of C P.O. Box 632 Tallahassee, I	ection forporations 7		
Enclose	ed is a check for	the follow	ing amour	nt:					
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

•	SHELLEY J.	ENTERPRIS	's INC	
(Enter name of "Inc.," "Co.," "	corporation; must include "INCO Corp," "Inc," "Co," or "Corp.")	RPORATED," "COMP	ANY," "CORPORATION	"
	•			
				
	lable in Florida, enter alternate co			•
(State or country	under the law of which it is incom	3	GEI number if appli	
·(Dat	e of incorporation)	5(Duratio	n: Year corp. will cease to	exist or "perpetual")
	a			,
	(Date first transac	ted business in Florida, i	if prior to registration) to determine penalty is ability	
-				
·	1812 LANA	ipal office address)	- BCX 611- X	A ISIE OI
	(F 1 1 1 1 1 1 1 1 1 1	•	
	(Currer	nt mailing address)		
	110001	δ		
Purnosel	VACATioN s) of corporation authorized in ho		carried out in state of Flor	S. Gidel
	•	-		
. Name and stre	et address of Florida registered		•	S≥3° —
Name:	RLUE PLANA	1 officer Im	<u>^</u>	9 A SEE.
	1107 Ker Pla	AZA #304		AH 9: OF STA FLOR
ffice Address:	Kpf West (City)	E1 33040EL	awida	JAIE JAIE
ffice Address:	1/1 0/2/3/	<u> </u>	(7: da)	A
office Address:	(Citý)		(Zip code)	
	•		(Zip code)	
). Registered a	(City) gent's acceptance: ned as registered agent and to		· ·	corporation at the
). Registered a aving been nan signated in this	gent's acceptance: ned as registered agent and to s application, I hereby accept	accept service of pro the appointment as re	cess for the above stated egistered agent and agre	e to act in this capa
0. Registered a laving been nan esignated in this erther agree to c	gent's acceptance: ned as registered agent and to	accept service of pro the appointment as re all statutes relative to	cess for the above stated egistered agent and agre the proper and complet	e to act in this capa
laving been name esignated in this arther agree to	gent's acceptance: ned as registered agent and to s application, I hereby accept comply with the provisions of	accept service of pro the appointment as re all statutes relative to	cess for the above stated egistered agent and agre the proper and complet	e to act in this capa
0. Registered a laving been nan esignated in this erther agree to c	gent's acceptance: ned as registered agent and to s application, I hereby accept comply with the provisions of	accept service of pro the appointment as re all statutes relative to	cess for the above stated egistered agent and agre the proper and complet tion as registered agent.	e to act in this capa

^{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.

1. The name of the corporation: Shelley J. Enterprises, INC.	
2. The principal office address: POB 619 18/2. LAUSIS AUC	
Ser Fsle City, NJ 08243	
3. The mailing address (if different): 49 GRove ST 4C	
NEW YORK, NY 10014	
4. Date of incorporation/qualification: 8-2-12 Document number: 0161023109	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Blue Planet Offices inc	
1107 Key Plaza # 306	
Key West, FL 33040	
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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to convert with the provisions of all statutes relative to the proper and complete performance of my duties, and tam familiar with and accept the obligation of my position as registered agent. Or, if his document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent 12-10-2013 Date	
If signing on behalf of an entity:	
Dan F. Schramm	
CEO, Blue Hand Others The	

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

A. DIRECTORS	
Chairman:	13 TAL
Address:	AFF C
	ARY SSE
Vice Chairman:	E OF
Address:	STAIL OR
	Dir.
Director:	
Address:	
Director:	2
_	
Address:	
B. OFFICERS	
President: Shelley Montes Sames	
Address: 8777 Columbia Circle	
CANTOU MI 48127	
Vice President: LESSE JAMES	
Address: 1812 LANDIS AVE PUB 619	
Ser Isle CH NJ 082	43
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office	cers and/or directors.
13.	
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 above) affirm are true and that he or she is aware that false information submitted in a document to the De	s that the facts stated herein partment of State constitutes
a third degree felony as provided for in s.817.155, F.S.	
14. <u>Jesse M. Sames</u>	
(Typed or printed name and capacity of person signing application)	

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

SHELLEY J. ENTERPRISES, INC.

0101023109

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on August 2, 2012.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Jesse M James 1812 Landis Avenue Sea Isle City, NJ 08243

THE STATE OF THE S

Certification# 130471060

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 10th day of December, 2013

Andrew P Sidamon-Eristoff State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp



October 25, 2013

JESSE JAMES POST OFFICE BOX 619 SEA ISLE CITY, NJ 08243 US

SUBJECT: SHELLEY J. ENTERPRISES, INC.

Ref. Number: W13000059548

We have received your document for SHELLEY J. ENTERPRISES, INC. and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

The registered agent and street address must be consistent wherever it appears in your document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

To ensure your money is properly credited, please return a copy of this letter with your corrected document. Please return your corrected document within 30 days or your filing will be considered abandoned.

Mel Solomon Regulatory Specialist II Supervisor

Letter Number: 313A00024991