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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

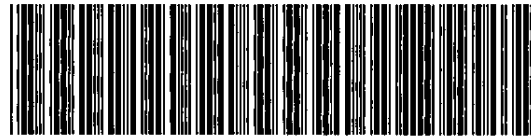
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**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** JAN VENTURE GROUP, 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," or "Certificate of Good Standing" 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:

JOLANTA NOWAKOWSKA  
Name of Person  
JAN VENTURE GROUP, INC.  
Firm/Company  
2640 NE 35 ST, APT 418  
Address  
NORTH MIAMI, FL 33181  
City/State and Zip code  
JOLANOWA@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOLANTA NOWAKOWSKA at (917) 797-0059  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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

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. JAN VENTURE GROUP, INC.  
(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)

2. NEVADA 3. 46-494-1760  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/17/2014 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 03/13/2014  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2640 NE 135th St, North Miami, FL 33181  
(Principal office address)

(Current mailing address)

8. REAL ESTATE INVESTMENT  
(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)

Name: Business Filings Incorporated

Office Address: 515 E. Park Avenue

Tallahassee, Florida 32301  
(City) (Zip code)

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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.

[Signature] Assistant Secretary  
(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:

A. DIRECTORS

Chairman: JOLANTA NOWAKOWSKA

Address: 2640 NE 135th St, APT 418  
NORTH MIAMI, FL 33181

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: JOLANTA NOWAKOWSKA

Address: 2640 NE 135th St, APT 418  
NORTH MIAMI, FL 33181

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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B. OFFICERS

President: JOLANTA NOWAKOWSKA

Address: 2640 NE 135th St, APT 418  
NORTH MIAMI, FL 33181

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: JOLANTA NOWAKOWSKA

Address: 2640 NE 135th St, APT 418

Treasurer: JOLANTA NOWAKOWSKA

Address: 2640 NE 135th St, APT 418, N. MIAMI, FL 33181

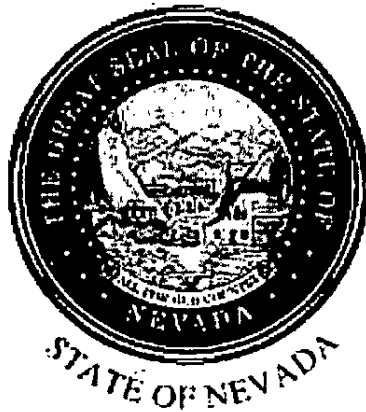
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Jolanta Nowakowska  
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. JOLANTA NOWAKOWSKA PRESIDENT  
(Typed or printed name and capacity of person signing application)

# SECRETARY OF STATE




## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **JAN VENTURE GROUP, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 17, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 4, 2014.



  
ROSS MILLER  
Secretary of State

Electronic Certificate  
Certificate Number: C20140304-1228  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>