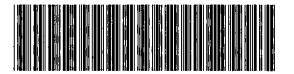
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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: L, M, & J, In L (L m End.) Name of corporation - must include suffix	I, Inc)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in F "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to registe above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Jeanne Dooley Name of Person	
Craft Growless To Go	
Cell Mangrove Point Rd	
Sarabota, FL 34242	
Saratota, fl 34242 City/State and Zip code Jeanne D Hannedooley golf. Com E-mail address: (to be used for future annual report notification)	.
For further information concerning this matter, please call:	
Flanne Dookey at (404) 822-4726 Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 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 Certified Copy Certificate Certified Copy Cer	e of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
DARDO LM&J. 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)	
(State or country under the law of which it is incorporated) 3. 58-2203864 (FEI number, if applicable)	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
5. APPARTUAX	
(Date of incorporation) (Bate of duration, if other than perpetual)	in (F)
(Date first transacted business in Florida, if prior to registration)	111 6
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 611 Mangrove Point Rd Sarasta, Fi	21/21/2
617 Mangrove Point Kd Sarasa, FL:	39242
(Principal office address)	
(Current mailing address, if different)	
And the second s	201
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	SA TI
Name: Jeanne Dooley	FILE!
1111 Manarave Roint Rd	8 E
60×0/4+11 3×12/7	
Sarasota , Florida 34247 (City) (Zip code)	M 10: 07
Registered agent's acceptance:	
aving been named as registered agent and to accept service of process for the above stated corporation at the pl	
signated in this application, I hereby accept the appointment as registered agent and agree to act in this capaci rther agree to comply with the provisions of all statutes relative to the proper and complete performance of my ties, and I am familiar with and accept the obligations of my position as registered agent.	ty. I
Guerra Dook	
(Registered agent's signature)	

10. 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.

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Ychairman: Jeanne Dooley	
Address: <u>Genne Dooley</u> Address: <u>Genne Dooley</u> Sarasota, F2 34242	_
Sarasota F2 34242	
	_
Vice Chairman:	_
Address:	_
	_
Director:	
Address:	_
	_
Director:	_
Address:	
	_
D. OPPICEDS) 1
B. OFFICERS	i ac
President: Openine people	
Address: Lett Mangrove Point Rd. Sarasota, FL 34242	ఛ
Sarasota, FL 34242	07
Vice President:	-
Address:	
Secretary: Jeanne Docky	_
Address: 611 Mangrove Point Rd Sarasata, F1 34242	_
	_
Address: Lett Mangrove Point Rd Sarasota, Fr 34242	_
Address: [1] Mingrove 10/11+ ROC Sarasora, 12 34242	_
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
12. Signature of Director or Officer	_
The officer or director signing this document (and who is listed in number 11 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.	
to and Doday	
(Typed or printed name and capacity of person signing application)	_

Control Number: K523633

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia; do hereby certify under the seal of my office that

LM & J, INC

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number Date Inc/Auth/Filed Jurisdiction

Print Date Form Number : 12163169 : 07/31/1995

: Georgia : 9/16/2015





B: P. Kemp Secretary of State