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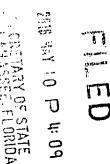
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer: Mane Confl. WIW 25571 Cert.					

Office Use Only



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SHAPBEN



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2016

MARIO E. COSIO JAB UNIVERSAL, INC. P.O. BOX 27740 LAS VEGAS, NV 89126

SUBJECT: JAB UNIVERSAL, INC. Ref. Number: W16000025571

We have received your document for JAB UNIVERSAL, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is P11000037848 JAB UNIVERSAL INC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II

Letter Number: 716A00007091

COVER LETTER

TO:	_			
	•			
SUBJ	JECT:			
		Name of corporation	n - must include su	ffix
Dear S	Sir or Madam:			
"Certi	ficate of Existence," o	r "Certificate of Good Sta	nding" and check a	
Please	e return all corresponde	ence concerning this matte	r to the following:	
		Name of	Person	
JAB U	NIVERSAL, INC.			
РО ВС	OX 27740	Firm/Cor	npany	
LAS V	Name of corporation - must include suffix ir or Madam: closed "Application by Foreign Corporation for Authorization to Transact Business in Florida," leate of Existence," or "Certificate of Good Standing" and check are submitted to register the referenced foreign corporation to transact business in Florida. return all correspondence concerning this matter to the following: Name of Person Name of Person Name of Person Address EGAS, NV 89126 City/State and Zip code E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: DE COSIO 305 725-5917 at (
		City/State a	ind Zip code	
	E	-mail address: (to be used	for future annual re	eport notification)
For fu	rther information conc	erning this matter, please	call:	
MARI	O E COSIO	*		
	Name of Person		le Daytime	Telephone Number
	Registration Section Division of Corporat Clifton Building 2661 Executive Cen	ions er Circle	Registra Division P.O. Box	tion Section of Corporations x 6327
Enclos	sed is a check for the f	ollowing amount:		
□ \$70	0.00 Filing Fee		_	

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.

JAB UNIVERS.		7 No. 1				
(Enter name of co	Orporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.") UNIVERSAL, Florida, I					
(If name unavaila	ble in Florida, enter alternate corporate name ado	pted for the purpose of transacting	g business in Flor	ida)		
Nevada 2.						
(State or countr	v under the law of which it is incorporated)	(FEI number, if applicable)				
4.	Pe	erpetual				
(Date	of incorporation)	(Date of duration, if other than perpetual)				
6.				-		
7	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502 he Rd Suite 300 Las Vegas NV 89147 (Principal Las Vegas NV 89126		ty)	<u></u>		
1.0.0000		address, if different)				
8. Name and street Name: Office Address:	et address of Florida registered agent: (P.O.) Business Filings Incorporated 1200 S Pine Island Rd		THE WAY TO P 4: 09			

9. 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.

Blenna Slutter asst. Scretary
(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. DIKE	CCTORS			
Chairman:	N/A			• •
ice Chair	man:			
.ddress: .			···	
- Director:	Dianna R Temple		 	
Address	4730 S Fort Apache Rd Suite 300	-		
- Lucia 000,	Las Vegas NV 89147			
liractor:	N/A			
	 			
tuutess.				and the last
B. OFF	CEDC	75 75	75-C	derivida semalari
	Dianna R Temple		Ö	
President: Address:	4730 S Fort Apache Rd Suite 300		<u></u>	Ö
	Las Vegas NV 89147	BE BE	0.0	
Jice Presi	IV/A		·	
	ident;	· · · · · · · · · · · · · · · · · · ·		
nuuress.				
Secretary	Dianna R Temple		<u>- , </u>	
Address:	4730 S Fort Apache Rd Suite 300 Las Vegas NV 89147			
Treasurer	Dianna R Temple			
Address:	4730 S Fort Apache Rd Suite 300 Las Vegas NV 89147			
NOTE:	If necessary, you may much an application listing additional office	cers and	/or dire	ectors.
12	Signature of Director or Officer			<u> </u>
are true a a third de	there or director signing this document (and who is listed in number 11 above) affirm and that he or she is aware that false information submitted in a document to the Deegree felony as provided for in s.817.155, F.S. and R Temple, President	s that th partmen	e facts at of St	stated herein ate constitute
13.	(Typed or printed name and capacity of person signing application)	·	;	

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, 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, JAB UNIVERSAL, 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 5, 2016, 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 22, 2016.

BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20160322-2646
You may verify this electronic certificate
online at http://www.nvsos.gov/