# F17000003976

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Pertified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	v



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09/01/17--01002--003 \*\*87.50



### **COVER LETTER**

TO: Registration Section Division of Corpora			
SUBJECT: J.E.M. Pro, Inc	Name of corporation	- must include suffix	
Dear Sir or Madam:	·		
	or "Certificate of Good Stan	Authorization to Transact Busine ding" and check are submitted to ss in Florida.	
Please return all correspond Jeff Miville	ence concerning this matter	to the following:	
<del></del>	Name of	Person	<del></del>
J.E.M. Pro, Inc.			
	Firm/Com	pany	
142 Pinehurst Circle			
Address Naples, FL 34113		E-93 7	
·	City/State a	nd Zin gyda	
jeff@jemproinc.com	Chyrotate a	nd Zip Code	ü F
	E-mail address: (to be used t	for future annual report notificati	ion) ; = =================================
For further information con-		·	2
Jeff Miville	570	4476432	
Name of Person	at (	e Daytime Telephone Nu	ımber
STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32 Enclosed is a check for the	n itions nter Circle 301	MAILING ADDRES Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 3231	ons
	-	Certified Copy Co	7.50 Filing Fee, ertificate of Status & ertified 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.

	orporation; must include "INCORPORATED orp." "Inc.," "Co." or "Corp.")	," "COMPANY," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting l	business in Florida)	
Pennsylvania	3	27-0691796		
# /2 // /2 IV //	y under the law of which it is incorporated)			
(Date	of incorporation)	(Date of duration, if other th	(Date of duration, if other than perpetual)	
N/A				
1180 St. Davids I	Rd. Williamsport, PA 17701	1502, F.S., to determine penalty liability	,	
1180 St. Davids I	(Princ	ipal office address)	·	
1180 St. Davids	(Princ		17/2/17	
Name and stre	(Princ	ipal office address) ling address, if different)	17 85 3	
Name and stree	(Princ (Current mail et address of Florida registered agent: (P	ipal office address) ling address, if different)	17 85 31	
Name and stre	(Princ (Current mail et address of Florida registered agent: (P Jeff Miville	ipal office address) ling address, if different)  O. Box NOT acceptable)	17 85 3	

. Registered agent's acceptance:

laving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I irther agree to comply with the provisions of all statutes relative to the proper and complete performance of my tties, and I am familiar with and accept the obligations of my position as registered agent.

> Jeffrey E. Miville (Registered agent's signature)

. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to : Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction der the law of which it is incorporated.

## 11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \_\_\_\_\_\_\_ Address: \_\_\_\_\_\_ Vice Chairman: Director: Address: B. OFFICERS Jeff Miville President: 142 Pinchurst Circle Address: \_ Naples, FL 34113 Jeff Miville Vice President: Address: 112 Pinchuret Circle Naples, FL 34113 Jeff Miville Secretary: Naples, Ft. 34113 142 Pinehurst Circle Address: Jeff Miville "reasurer: \_\_ 142 Pinehurst Circle Naples, FL 34113 iddress: \_\_\_\_ IOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Jeffrey E. Mwille Signature of Director or Officer he officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein e true and that he or she is aware that false information submitted in a document to the Department of State constitutes third degree felony as provided for in s.817.155, F.S. Jeff Miville / owner

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

08/18/2017

#### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT.

JEM PRO, INC.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC170818120788-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify