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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

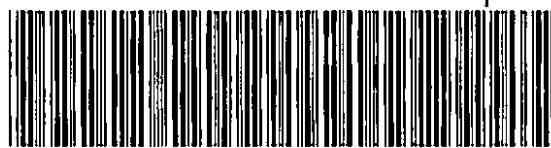
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

Jabil Circuit Financial II, Inc.

SUBJECT: _____
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:

Lisa N. Clark

Name of Person

Jabil Inc.

Firm/Company

888 Executive Center Dr., W., 3rd Fl

Address

St. Petersburg, FL 33702

City/State and Zip code

lisa_clark@jabil.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Clark

727 803-3458

Name of Person

at (

) 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 \$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.

Jabil Circuit Financial II, Inc.

1. _____
(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. Delaware 3. 20-0694424
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 23, 2004 5.
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 10560 Dr. Martin Luther King Jr. St., N., St. Petersburg, FL 33716
(Principal office address)

888 Executive Center Dr., W., 3rd Fl, St. Petersburg, FL 33702
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System
Office Address: 1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL , Florida 33324
(City) (Zip code)

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.

Peter F. Souza
Assistant Secretary

(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

Sergio A. Cadavid

Chairman: _____
Address: _____
10560 Dr. MLK, Jr. Street North
St. Petersburg, FL 33716

Vice Chairman: _____

Address: _____

Brian T. Harrison

Director: _____
Address: _____
10560 Dr. MLK, Jr. Street North
St. Petersburg, FL 33716

Timothy W. Traud

Director: _____
Address: _____
10560 Dr. MLK, Jr. Street North
St. Petersburg, FL 33716

B. OFFICERS

Sergio A. Cadavid

President: _____
Address: _____
10560 Dr. MLK, Jr. Street North
St. Petersburg, FL 33716

Timothy W. Traud

Vice President: _____
Address: _____
10560 Dr. MLK, Jr. Street North
St. Petersburg, FL 33716

Timothy W. Traud

Secretary: _____
Address: _____
10560 Dr. MLK, Jr. Street North, St. Petersburg, FL 33716

Sergio A. Cadavid

Treasurer: _____
Address: _____
10560 Dr. MLK, Jr. Street North, St. Petersburg, FL 33716

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

12. _____

Sergio A. Cadavid
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.

13. _____ Sergio A. Cadavid, President

(Typed or printed name and capacity of person signing application)

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JABIL CIRCUIT FINANCIAL II, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JABIL CIRCUIT FINANCIAL II, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF JANUARY, A.D. 2004.

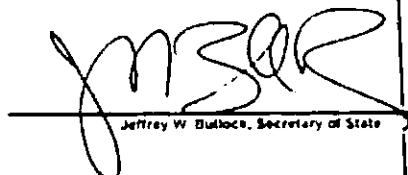
AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



3756216 8300

SR# 20176828547

You may verify this certificate online at corp.delaware.gov/authver.shtml



Jeffrey W. Bullock, Secretary of State

Authentication: 203477607

Date: 10-27-17