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COVER LETTER

TO:		ration Sc on of Co									
	D17131	JENTRY	-								
SUBJ	ECT:			<u> </u>		_					
				Name	of corporat	tion	- must ir	iclude suf	Tix		
Dear S	Sir or Ma	adam:									
"Certi	ficate of	Existenc	e," (r "Certificate	of Good S	Stan	ding" an	d check as			
Please	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 covereferenced foreign corporation to transact business in Florida. The ease return all correspondence concerning this matter to the following: REDERIC V. BLANCHARD Name of Person VB PARTNERS Firm/Company DROAD ST, STE 3502 Address EW YORK, NY 10004 City/State and Zip code DMINISTRATION@KVBPARTNERS.COM E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: REDERIC V. BLANCHARD 646 356-0460										
FRED	ERIC V.	BLANCE	IARI)							
				· · · · · ·	Name	of F	erson	· · · · · · · · · · · · · · · · · · ·			
KVB	PARTNE	RS									
			_		Firm/C	Com	pany				
60 BR	OAD ST	, STE 350	2				. •				
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NEW	YORK, N	NY 10004									
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			E	-mail addres	s: (to be us	ed fe	or future	annual re	port n	otification)	
For fu	rther inf	ormation	con	erning this n	natter, plea	se c	all:				
FRED	ERIC V.	BLANCE	IARI)	646 at (356-0	460			
	Name	of Perso	n		Area (Code		Daytime 1	Teleph	one Numbe	er
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					
Enclos	ed is a c	heck for	the t	ollowing am	ount;						
\$ 70	0.00 Fili	ng Fee	٥	\$78.75 Filin Certificate	g Fee & of Status	0		Filing Fee d Copy	e &	Certif	Filing Fee, icate of Status & ied 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.

(If name unavail	able in Florida, enter alternate corporate na	me adopted for the purpose of transacting busin	ess in Florida)
DELAWARE		3	
(State or country DECEMBER 1	ry under the law of which it is incorporated)	5. (Date of duration, if other than pe	
(Date	of incorporation)	(Date of duration, if other than pe	rpetual)
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60 3502 New York , NY 10004	ess in Florida, if prior to registration) 17.1502, F.S., to determine penalty liability)	18
·		ncipal office address)	JAN RO
 	(Current m	ailing address, if different)	7
. Name and stree	et address of Florida registered agent: (Paracorp Incorporated	(P.O. Box <u>NOT</u> acceptable)	1.2:49 FLORIDA
Office Address:	155 Office Plaza Drive, 1st Floor		·
mee ridatess.	Tallahassee	, Florida	
	(City)	(Zip code)	
laving been nam esignated in this arther agree to c	application, I hereby accept the appoin	ervice of process for the above stated corp intment as registered agent and agree to a les relative to the proper and complete per ns of my position as registered agent.	ict in this canacity.

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 Chairman: ___ Address: ___ Vice Chairman: ____ Address: _____ Director: __ Address: _ ᇴ **B. OFFICERS** Marion Assuied President: 60 Broad St, Ste 3502 New York , NY 10004 Address: __ 9 Vice President: Address: Catherine Chesseron Secretary: 60 Broad St, Ste 3502 New York, NY 10004 Address: Treasurer: __ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. tere can 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. <u>Catherine CHESSERON</u> - Secretary
(Typed or printed name and capacity of person signing application)

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 1/16/18

ENTITY NAME: JENTRY, US INC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Milton Vong , Assistant Secretary

Paracorp Incorporated

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JENTRY U.S., 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 ELEVENTH DAY OF DECEMBER, 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 "JENTRY U.S.",
INC." WAS INCORPORATED ON THE TENTH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HA

Z PH :2: 49

Authentication: 203728457

Date: 12-11-17

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