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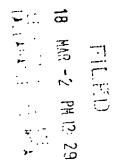
(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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J. LEGGETT MAR 0 5 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 22, 2018

GREGG STEIN 518 TOWNSHIP LINE ROAD, STE 300 BLUE BELL, PA 19422 US

SUBJECT: JUNO ENTERPRISES, INC.

Ref. Number: W18000017922

We have received your document for JUNO ENTERPRISES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 118A00003710

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COVER LETTER

TO:	Registration Section			
	Division of Corporations			
SHRI	Juno Enterprises, Inc. JECT:			
5010		ame of corporation	ı - must include suffix	_
Dear S	Sir or Madam:			
"Certi	nclosed "Application by Foreig ficate of Existence," or "Certi- referenced foreign corporation	ficate of Good Sta	nding" and check are sub	
Please Gregg	return all correspondence cor Stein	cerning this matte	r to the following:	
		Name of	Person	
RSM U	JS LLP			
518 To	ownship Line Road ₁ Ste 300	Firm/Con	npany	
		Addr	ess	·
Blue B	ell, PA 19422			
sheila.c	copenhaver@rsmus.com	City/State a	nd Zip code	
	E-mail ad	dress: (to be used	for future annual report	notification)
For fu	rther information concerning t	his matter, please (call:	
Sheila Copenhaver		215	648-3040	
	Name of Person	at (Area Cod		hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Engla-	Tallahassee, FL 32301	amang t		
Enclos	ed is a check for the following	; ашоин;		
□ \$70		Filing Fee & cate of Status	\$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee. Certificate of Status &

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. Juno Enterprises, Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "lnc.," "Co.," "Corp," "lnc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 23-2575660 (FEI number, if applicable) (State or country under the law of which it is incorporated) 06/09/1989 (Date of incorporation) 01/01/2018 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7900 Old Marsh Road. Palm Beach Gardens, FL 33418 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Karen Fischer

9. Registered agent's acceptance:

7900 Old Marsh Road

Palm Beach Gardens

(City)

Name:

Office Address:

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.

______. Florida _____(Zip code)

(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 Chairman: Director: __ Address: **B. OFFICERS** Karen Fischer President: 7900 Old Marsh Road Address: Palm Beach Gardens, FL 33418 Vice President: Address: Joan Siegel Secretary: 13740 Le Havre Drive, Palm Beach Gardens, FL 33410 Address: Barbara Richardson Treasurer: 1100 Red Rose Lane, Villanova, PA 19085 Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Karen Trocker 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. Karen Fischer, President

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

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 02/09/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

JUNO ENTERPRISES, 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.

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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

Acting Secretary of the Commonwealth

Certification Number: TSC180209161813-1

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