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COVER LETTER

TO: Registration Section Division of Corporations	i.		
SUBJECT: JAQUITH & CO., I	NC.		
SUBJECT.	Name of corporation -	must include suffix	
Dear Sir or Madam:			
	ertificate of Good Stand	uthorization to Transact Business in ing" and check are submitted to reg in Florida.	
Please return all correspondence JAMES L PATTON	concerning this matter to	o the following:	
	Name of Pe	erson	. , ,
	Firm/Comp	any	~
113 NOTTINGHAM DR. E			7020 .
Address SAINT JOHNS, FL 32259		24 (**11:3	
jlp36@optonline.net	City/State and	i Zip code	.:
E-mai	l address: (to be used for	r future annual report notification)	 ယ လ
For further information concerning	ng this matter, please cal	П:	, -
James Patton	at (474-5041	
Name of Person	Area Code	Daytime Telephone Number	-
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
=	RIDA DEPARTMENT C .75 Filing Fee & 🗆 🗆 :	\$78.75 Filing Fee & Security \$87.50 Certified Copy Certified Copy	Filing Fee, cate of Status & ed 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.

L. JAQUITH & CC	J., INC.			
(Enter name of c	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	-	
(If name unavail	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacting bu	isiness in Florida	
LA 2.	3			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
4. 04/18/1990	5.			
(Date	of incorporation)	(Date of duration, if other than	(Date of duration, if other than perpetual)	
6. Relocating: No	business will be transacted until March, 2020			
7	(SEE SECTIONS 607.1501 & 607.150 Dr. E. Saint Johns, FL 32259 (Principal office		<u> </u>	
	(Current mailing	address, if different)	2020 J	
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	<u>.</u> د	
Name:	James L. Patton		21,	
Office Address:	113 Nottingham Dr. E	,		
	Saint Johns	, Florida	(-) (-)	
	(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.

(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.

A. DIRECTORS						
Chairman	Name: Carol J. Patton	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address: Properties			
□Director	Saint Johns, FL 32259	Director	Saint Johns, FL 32259			
President		□President				
□Vice President	·····	□Vice President				
□Secretary	□Treasurer	■ Secretary	■ Treasurer			
□Other	Other	Other	Other			
_						
□Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary	□Treasurer			
□Other	Other	Other	Other <u>22</u>			
□Chairman	Name:	□ Chairman	Name: 2			
□Vice Chairman	Address:	□Vice Chairman	Address:			
☐ Director		□Director				
□President		□President	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary	□Treasurer			
Other	Other	□Other	Other			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.						
12. 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 of 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. JAMES L. PATTON (Typed or printed name and capacity of person signing application)						

SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

JAQUITH & CO. INC.

A corporation domiciled in GEISMAR, LOUISIANA,

Filed charter and qualified to do business in this State on April 20, 1990,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

January 21, 2020

Cert To v

Certificate ID: 11159769#4CS93

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

R 12fe 162 Secretary of State

Web 34354208D

STATE OF KANSAS OFFICE OF SECRETARY OF STATE SCOTT SCHWAB

I, SCOTT SCHWAB, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 4443651

Entity Name: JAQUITH & CO. INC.

Entity Type: FOREIGN FOR PROFIT

State of Organization: LA

Resident Agent: JAMES L PATTON

Registered Office: 4815 LONE ELM, SHAWNEE, KS 66226

was filed in this office on August 25, 2010, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of December 02, 2019

SCOTT SCHWAB SECRETARY OF STATE

Certificate ID: 1119798 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.