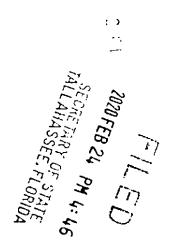


(Requestor's Name)						
(Address)						
(Addiess)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 189597 8025880

AUTHORIZATION :

COST LIMIT : \$/70.00

ORDER DATE: February 21, 2020

ORDER TIME : 12:01 PM

ORDER NO. : 189597-015

CUSTOMER NO: 8025880

FOREIGN FILINGS

NAME: JHCC MANAGEMENT INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

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.

JHCC Manager	nent Inc.				
	corporation; must include "INCORPOR corp," "Inc," "Co," or "Corp.")	ATED," "COMPANY," "CORPORATION,"			
(If name unavail	able in Florida, enter alternate corporate	e name adopted for the purpose of transacting business in Florida)			
Delaware 2.		3			
_· 	y under the law of which it is incorpora				
4. 12/18/2019		5. Perpetual			
	of incorporation)	(Date of duration, if other than perpetual)			
6. Upon filing		TA T	î.		
1318 Pike Road.		siness in Florida, if prior to registration) 2 607.1502, F.S., to determine penalty liability)	= m		
7.		ipal office street address)	Ö		
		t mailing address, if different)			
8. Name and stree Name:	et address of Florida registered agen Corporation Service Company	t: (P.O. Box <u>NOT</u> acceptable)			
Office Address:	1201 Hays Street				
	Tallahassee	, Florida			
	(City)	(Zip code)			
designated in this further agree to c and I am familiar	ned as registered agent and to accept application, I hereby accept the appoint with the provisions of all states with and accept the obligations of corporation Service Company	of service of process for the above stated corporation at the place oppointment as registered agent and agree to act in this capacity states relative to the proper and complete performance of my distinct my-position as registered agent. Kadesha Roberson Asst. Vice President	y. I		

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
□Chairman	Name:	☐ Chairman	Name:				
□Vice Chairman	Address:	□ Vice Chairman	Address:				
■Director	Pike Road, AL 36064	Director					
■President		☐ President					
□Vice President		□Vice President					
☐ Secretary	☐Treasurer	☐ Secretary		□Treasurer			
Other	Other	□Other		□ Other			
	Name: Greg Glover						
□ Chairman		□ Chairman	Name:	· · · · · · · · · · · · · · · · · · ·			
□Vice Chairman	Address:	□ Vice Chairman	Address:				
Director	Pike Road, AL 36064	Director		20211 SEC			
□President		□President		LARCITY TO			
☐ Vice President		☐Vice President					
Secretary	Treasurer	☐ Secretary		Treasurer P			
Other CFO	Other	Other		STATE 17			
GChai—a-	None	Chairman.	Manag	Þ			
□ Chairman	Name:	□ Chairman _	-				
□ Vice Chairman	Address:	☐ Vice Chairman	Address:				
□Director		☐ Director	-	· · · · · · · · · · · · · · · · ·			
□President		☐ President					
□Vice President		☐ Vice President		,			
☐ Secretary	☐ Treasur er	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		000		·			
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. Greg Glover, CFO & Secretary (Typed or printed name and canacity of person signing application)							
(Typed or printed name and capacity of person signing application)							

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "JHCC MANAGEMENT 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-FIRST DAY OF FEBRUARY, A.D.

2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JHCC MANAGEMENT TINC." WAS INCORPORATED ON THE EIGHTEENTH DAY OF DECEMBER, A.S. 2019.

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

Authentication: 202439118

Date: 02-21-20