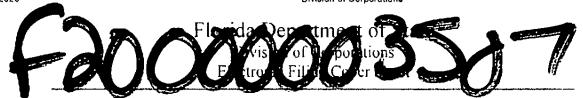
8/11/2020

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000274642 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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## FOREIGN PROFIT/NONPROFIT CORPORATION JLZ CONSULTING INC.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: JLZ CONSULTING INC.	
Name of corporation	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact busing	anding" and check are submitted to register the
Please return all correspondence concerning this matter	er to the following:
Cheyenne Moseley	
Name o	of Person
Legalzoom.com, inc.	
FirnVCo	ompany
101 N Brand Blvd 11th Fl	
Add	dress
Glendale, CA 91203	
City/State	and Zip code
archana@dlpc.co	
E-mail address: (to be used	d for future annual report notification)
For further information concerning this matter, please	call:
Cheyenne Moscley 800	773-0888
Name of Person Area Co	ode 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
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPARTMEN  \$70.00 Filing Fee \$  Certificate of Status	ST OF STATE  \$ \$78.75 Filing Fee & \$ \$87.50 Filing Fee, Certified Copy 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.

JEZ CONSULT	ING INC.		
(Enter name of a "Inc.," "Co.," "C	corporation; must include "INCORPORATED," Curp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORA"	TION,"
(If name unavai	lable in Florida, enter alternate corporate name a	dopted for the purpose of trans	acting business in Florida)
Delaware	3.		
(State or coum 05/04/2020	ry under the law of which it is incorporated)	(FEI number, if applicable)  (Date of duration, if other than perpetual)	
(Date	of incorporation)	(Date of duration, if o	ther than perpetual)
-	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 22. F.S., to determine penalty li	ability)
323 Sunny Isles	Blvd., Ste. 501, Sunny Isles Beach, FL 33160		
	(Principal offic	e <u>street</u> address)	
-	(Principal offic (Current mailing et <u>address</u> of Florida registered agent: (P.O. Drosos Lorenzo Associates PC	address, if different)  Box NOT acceptable)	262
Name and stre	(Principal offic (Current mailing et <u>address</u> of Florida registered agent: (P.O. Drosos Lorenzo Associates PC	address, if different)  Box NOT acceptable)	2020 At 5.51
Name and stre	(Principal offic (Current mailing et <u>address</u> of Florida registered agent: (P.O. Drosos Lorenzo Associates PC	address, if different)  Box NOT acceptable)	2020 AUS 1
Name and stre	(Principal offic (Current mailing et <u>address</u> of Florida registered agent: (P.O. Drosos Lorenzo Associates PC	address, if different)  Box NOT acceptable)	2828 AUS 11
Name and stre Name: Tice Address: Registered ag	(Principal office (Current mailing (Current mailing et address of Florida registered agent: (P.O. Drosos Lorenzo Associates PC 777 Arthur Godfrey Rd., Ste 404 Miami Beach (City)	address, if different)  Box NOT acceptable)  , Florida 33140 (Zip code)	
Name and stre Name:  ffice Address:  Registered agaving heen nan signated in this rther agree to contact the street of the street agree to contact the street agree agrees agree to contact the street agree agrees agree agrees agree to contact the street agree agrees agree agrees agree agrees agree agrees agrees agree agree agrees agree agree agrees agree agree agree agree agrees agrees agree agree agrees agree agree agreement agree agreement agree agreement a	(Principal office (Current mailing Current mailing et address of Florida registered agent: (P.O. Drosos Lorenzo Associates PC 777 Arthur Godfrey Rd., Ste 404 Mami Beach (City)	address, if different)  Box NOT acceptable)  Florida 33140  (Zip code)  of process for the above stant as registered agent and lative to the proper and com-	ated corporation at the p agree to act in this capac
Name and stre Name:  ffice Address:  Registered agaving heen nanesignated in this rther agree to contact the street of the street agree to contact the street agree agrees agree to contact the street agree agrees agree agrees agree agrees agree agree agrees agrees agree agree agree agrees agrees agrees agree agree agree agrees agrees agree agree agree agrees agrees agrees agree agree agree agrees agree agree agree agree agree agree agree agrees agree agree agree agrees agree agrees agree ag	(Principal office (Current mailing (Current mailing et address of Florida registered agent: (P.O. Drosos Lorenzo Associates PC 777 Arthur Godfrey Rd., Ste 404 Miami Beach (City)  ent's acceptance: acceptance: application, I hereby accept the appointmental comply with the provisions of all statutes re-	address, if different)  Box NOT acceptable)  Florida 33140  (Zip code)  of process for the above stant as registered agent and lative to the proper and com-	tated corporation at the p agree to act in this capac uplete performance of my

<sup>10.</sup> 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.

## To: Page 6 of 6 '

A. DIRECTORS						
Chairman	Name:	Chairman	Name:			
□Vice Chairman	Address: 323 Sunny Isles Blvd., Ste. 501	□Vice Chairman	Address:			
Director	Sunny Isles Beach, FL 33160	Director				
President	<del></del>	□President				
□Vice President		□Vice President				
Secretary	<b>■</b> Treasurer	Secretary	Treasurer			
Other	Other	Other	Ooller	<del>.</del>		
□ Chairman	Name;	□ Chairman	Name:			
□ Vice Chairman	Address:	□Vice Chairman	Address:			
Director		Director				
□President		□ President	<del></del>			
□ Vice President		□Vice President				
☐ Secretary	☐ Treasurer	Secretary	□Treasurer			
Other	Other	□ Other	Other			
Chairman	Name.	<b>⊕</b> Chairman	Name:			
□ Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		Director				
□President	<del></del>	□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 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.

Leonard Sulaymanov, President



Page 1

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

DELAWARE, DO HEREBY CERTIFY "JLZ CONSULTING 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 FOURTH DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JLZ CONSULTING INC." WAS INCORPORATED ON THE FOURTH DAY OF MAY, A.D. 2020.

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

Authentication: 203404420

Date: 08-04-20

7957134 8300 SR# 20206571545

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