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(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
W21000024045					
W21000024045					

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700359787367

02/12/21--01014--002 **70.00

3/10/21

COVER LETTER

TO:	Registration Section					
	Division of Corporations					
	L, J & M Manageme	ent Corporation				
SUBJ	ECT:	<u> </u>				
		Name of corporation	1 - mu	st include suffix		
Dear S	Sir or Madam:					
"Certi	nclosed "Application by Fo ficate of Existence," or "Ce referenced foreign corpora	rtificate of Good Star	nding'	and check are sub		
Please Lori C	return all correspondence (anale	concerning this matte	r to th	e following:		
		Name of	Perso	n	<u> </u>	
L.J &	M Management Corporation					
		Firm/Con	nnanv			
256 H	eron Avenue	i iiii/Con	npany			
						<u>ب </u>
		Addr	ess			
Naples	s, FL 34108					
		City/State a	nd 7i	n code	<u> </u>	
limme	mnt@aol.com	City/State a	110 251	peode		-
			7 - 5		·*·	<u> </u>
	t:-mail	address: (to be used	ior tu	ture annual report i	iotification)	•
For fu	rther information concerning	ig this matter, please	call:			
Lori Canale		914	494-0766			
1,011	anac	at ()	20700		
	Name of Person	Area Cod	le	Daytime Telep	hone 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			
Please	~	RIDA DEPARTMENT .75 Filing Fee &	_	STATE .75 Filing Fee &	□ \$87.50 Fi	ling Fee,
	Cer	tificate of Status	Cer	tified Copy		e 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.

orporation; must include "INCORPORATED," "(orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"			
of incorporation)	(Date of duration, if other than perpetual)			
(SEE SECTIONS 607.1501 & 607.1502, 63 Old Farm Road South, Pleasantville, NY 1058 (Principal office s	, F.S., to determine penalty liability)	277		
тарез. 11. 54100		1.		
t address of Florida registered agent: (P.O. B Lori Canale 256 Heron Avenue	Box <u>NOT</u> acceptable) —	· . - :-		
- u	y under the law of which it is incorporated) 5	(Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) Lori Canale		

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.

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

A. DIRECTORS	Lori Canale			
≡ Chairman	Name: 256 Heron Avenue, Naples, FL 34108			57 10:00 AV
□ Vice Chairman	Address:	□Vice Chairman	Address:	SGHERON AVE
□Director		Director		14111) LL 3910
President		□President	Edward Guid	der
□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
□Chairman	Name:	- □Chairman	Name:	
□Vice Chairma	n Address:	□ Vice Chairman	Address:	·
Director		Director		<u> </u>
□President		□President		:
	it	□Vice President		
Secretary		☐ Secretary		Treasurer
Other	Other	Other		□Other
individuals may	e: Use an attachment to report more than six (6). be added to the index when filing your Florida D Signature of D	repartment of State Amiliar is	report roini.	
she is aware tha	irector signing this document (and who is listed in a false information submitted in a document to the	n number 11 above) affirms (e Department of State consti	that the facts st tutes a third de	ated herein are true and that he o gree felony as provided for in
13	(Typed or printed name and capacity	of person signing application	on)	

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of L, J & M MANAGEMENT CORPORATION was filed on 05/16/1996, under the name of J&M REALTY MANAGEMENT CORP., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment J&M REALTY MANAGEMENT CORP., changing its name to L, J & M MANAGEMENT CORPORATION, was filed 10/09/1997.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 02nd day of February two thousand and twenty-one.

Braden C Hyles

Brendan C Hughes Executive Deputy Secretary of State



February 20, 2021

LORI CANALE 256 HERON AVENUE NAPLES, FL 34108 US

SUBJECT: L, J & M MANAGEMENT CORPORATION

Ref. Number: W21000024045

We have received your document for L, J & M MANAGEMENT CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Please return 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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 021A00003840

