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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Dc	ocument Number)
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Special Instructions to	Filing Officer:	

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COVER LETTER

	stration Section sion of Corporation	ns			
SUBJECT:	Jones Consulting,	Inc.			
ocomer.		Name of corporati	on - mus	t include suffix	
Dear Sir or M	ladam:				
"Certificate of	of Existence," or "	Foreign Corporation for Certificate of Good Startion to transact busing Certificate of Good Startion to transact busing Corporation for transact busing Corporation for the Corporation for the Corporatio	anding".	and check are subm	
Please return	all correspondence	e concerning this mat	ter to the	following:	
Paul F. Jones	Ш				
		Name o	of Person		
Jones Consult	ing, Inc.				
	-	Firm/Co	ompany		
503 Lakeland	Drive E6				
		Ad	dress	•	
Hot Springs, A	Arkansas 71913				
	-	City/State	and Zip	code	
pauljones@sv					
	E-m	ail address: (to be use	d for futu	ire annual report no	tification)
For further in	formation concern	ning this matter, please	e call:		
Paul F. Jones	Paul F. Jones III at (501 952-1000				
Nan	ne of Person	Area Co	ode	Daytime Telepho	one 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		
	ling Fee 🔲 💲	owing amount: ORIDA DEPARTME 18.75 Filing Fee & ertificate of Status	□ \$78.	FATE 75 Filing Fee & ified Copy	\$87.50 Filing Fee, 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.

Arkansas (State or country under the law of which it is incorporated) (PEI number, if applicable) 7/25/2011 (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 503 Lakeland Drive, E6, Hot Springs, AR 71913 (Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Paul Jones 12805 US Highway 98 East, Suite D201 Inlet Beach (City) Registered agent's acceptance: Paul Jones Jo	(If name unavaila	able in Florida, enter alternate corporate name ad-	opted for the purpose of transa	cting business in Florida)
(Date of incorporation) (Date of duration, if other than perpetual) (Date of incorporation) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 503 Lakeland Drive, E6, Hot Springs, AR 71913 (Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Paul Jones Name: 12805 US Highway 98 East, Suite D201 Inlet Beach (City) Registered agent's acceptance:	Arkansas	9. 3.	0-0745083	
(Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 503 Lakeland Drive, E6, Hot Springs, AR 71913 (Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Paul Jones 12805 US Highway 98 East, Suite D201 Inlet Beach (City) Registered agent's acceptance:	(State or countr	y under the law of which it is incorporated)	(FEI number, i	f applicable)
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Name: Paul Jones 12805 US Highway 98 East. Suite D201 Inlet Beach (City) Registered agent's acceptance:		·		
Name: Paul Jones	Name and stree	et address of Florida registered agent: (P.O. 1	Box <u>NOT</u> acceptable)	٧٠
Tice Address: 12805 US Highway 98 East, Suite D201 22 15 15 15 15 15 15 1	Name	Paul Jones		
	Name.	12805 US Highway 98 Fact Suite D201		
	fice Address:			21
		Inlet Beach	Florida	- ₋ -
		(City)	(Zip code)	108 H 12
aving been named as registered agent and to accept service of process for the above stated corporation at the		ent's accentance:		三草品 🚉
	Registered age			
	iving been nam signated in this	ed as registered agent and to accept service application, I hereby accept the appointme	nt as registered agent and o	agree to act in this cap
rther agree to comply with the provisions of all statutes relative to the proper and complete performance of n d I am familiar with and accept the obligations of my position as registered agent.	aving been nam signated in this rther agree to c	ed as registered agent and to accept service application, I hereby accept the appointme. omply with the provisions of all statutes relo	nt as registered agent and a utive to the proper and com	agree to act in this cap

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: Lisa L. Jones	□Chairman	Paul F. Jones III Name:
□Vice Chairman	Address: 503 Lakeland Drive, E6	□Vice Chairman	Address: 503 Lakeland Drive, E6
□Director	Hot Springs, AR 71913	□Director	Hot Springs, AR 71913
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	□'1'reasurer
□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
individuals may be	Use an attachment to report more than six (6). The attacted to the index when filing your Florida Department of Director or Signature of Director or	nt of State Annual Re	port form.

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.

Paul F. Jones III, Vice-President



Arkansas Secretary of State John Thurston

State Capitol Building • Little Rock, Arkansas 72201-1094 • 501-682-3409

Certificate of Good Standing

I, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

JONES CONSULTING, INC.

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office July 25, 2011.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 15th day of October 2021.

nline Certificate Authorization Code: c81070tb123d0fc
To verify the Authorization Code, visit sos.arkansas.gov