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SECRETARY OF STATE
SECRETARY OF STATE

9891 DEC -S AM I.-

COVER LETTER

TO: Registration Section Division of Corporation	s			
SUBJECT: Jack Trent & Co In	ec. dba JTC CPA's			
	Name of corporation - n	nust include suffix		
Dear Sir or Madam:				
The enclosed "Application by Fe "Certificate of Existence," or "Cabove referenced foreign corpor	Certificate of Good Standin	g" and check are submi-	Business in Florida," tted to register the	
Please return all correspondence	concerning this matter to	the following:		
Jack E Trent				
, <u>, , , , , , , , , , , , , , , , , , </u>	Name of Per	son		
Jack Trent & Co Inc.				
	Firm/Compar	ıy		
6213 N Cloverdale Rd, Suite 130				
	Address			
Boise ID 83713				
	City/State and 2	Zip code		
t.figgins@jtcllp.com				
E-ma	il address: (to be used for f	uture annual report noti	fication)	
For further information concerni	ng this matter, please call:			
Terry Figgins	at ()	47-2400		
Name of Person	Area Code	Daytime Telephor	ne Number	
STREET/COURIER A Registration Section Division of Corporation: The Centre of Tallahasse 2415 N. Monroe Street, Tallahassee, FL 32303	s ·	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	ORIDA DEPARTMENT OF 3.75 Filing Fee & 🖂 \$7		☐ \$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.

1. JACK TRENT &				_
	orporation; must include "INCORPORATED," orp," "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATIO)	N."	
(If name unavaila	able in Florida, enter alternate corporate name ac	lopted for the purpose of transactir	ig business in Florida)	_
2. IDAHO	3.	46-3557892		
(State or country	y under the law of which it is incorporated)	(FEI number, if ap	opticable)	_
8/28/2013 4.	5.			
(Date	of incorporation) 5.	(Date of duration, if other	than perpetual)	
6.		_		_
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		ity)	
7. 1850 Lee Road, U	Jnit 320, Winter Park, FL 32789			_
	(Principal offic	e <u>street</u> address)		
6213 N Cloverda	de Rd. Ste 130. Boise, ID 83713			-
	(Current mailing	address, if different)	74. 21 14. 21	
0.11		O NOTE AND LA	2021 DEC SECNE) TALL ANA	-17
8. Name and stree	et address of Florida registered agent; (P.O.	Box <u>NOT</u> acceptable)		
Name:	Steven Steward		48.84 4.00 4.00 4.00 4.00 4.00 4.00 4.00	
Office Address:	2460 Hunterfield Rd			
	Maitland,	. Florida	AM 4: 02 Y OF STATE ECTELORIO	0
	(City)	(Zip code)	\$ 2	
designated in this further agree to c	ent's acceptance: ned as registered agent and to accept service application. I hereby accept the appointm omply with the provisions of all statutes rewith and accept the obligations of my positions.	ent as registered agent and agi lative to the proper and comple	rec to act in this cap	acity. 1
	(Registered agent's sig	mature)		

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:	□Chai rm an	Name:		
☐ Vice Chairman	Address: 2217 W Preston St	□Vice Chairman	Address: 4132 N Pennfield Pl		
□Director	Eagle, ID 83616	Director	Boise ID 83713		
President		☐ President			
□ Vice President		□ Vice President			
□ Secretary	□ Treasurer	☐ Secretary	□ Treasurer		
Other	Other	Other CFO	□Other		
□Chairman	Name:	□ Chainnan	Name:		
	Address:		Address:		
		□ Director			
Director					
□ 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		
Important Notice: individuals may be	Use an attachment to report more than six (6). The atta e added to the index when filing your Florida Departme	ent of State Annual R	eport form.		
14	Signature of Director or Officer				
The officer or dire	ctor signing this document (and who is listed in numbe	r 11 above) affirms ti	hat the facts stated herein are true and that he o		

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 o 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.



STATE OF IDAHO

Lawerence Denney | Secretary of State

Business Office

450 North 4th Street

PO Box 83720

Boise, ID 83720

September 14, 2021

Request Type: Certificate of Existence/Filing

Request #:

0004419093

Receipt #:

000544935

Regarding:

JACK TRENT & CO INC.

Filing Type:

General Business Corporation (D)

Formation/Qualification Date. 08/28/2013

Status:

Active-Good Standing

Duration Term:

Perpetual

Issuance Date: 09/14/2021

Copies Requested:

0

601774

Formation Locale: IDAHO

Inactive Date:

File #:

Certificate of Existence

I, Lawerence Denney, Secretary of State of the State of Idaho, do hereby certify that effective as of the issuance date noted above

JACK TRENT & CO INC.

is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above.

Lawerence Denney

Idaho Secretary of State

Processed By: Business Division Verification #: 014282325

Phone: 208-334-2301 * Email: business@sos.idaho.gov * Website: sosbiz.idaho.gov





CERTIFICATE OF ASSUMED BUSINESS NAME

	Title 30, Chapter 21, Part 8, Idaho Code. Base filing fee: \$25.00 + \$20.00 for manual processing (form must be typed).					04/1		
1.	The assumed business name which the undersigned use(s) in the transaction of business is: JTC CPA					9/2 021		
2.	The individual and/o the assumed busine JACK TRENT & CO (Name)	ess name (do <u>no</u>	ot include the nam 3 N CLOVER	e you listed in	#1):		rd	
	(Name)	(Addres	SS)	<u> </u>			e Ce iv	
	(Name)	(Addres	·					
3.	•			e assumed l	ousiness name	e is:	y ID	
	Retail Trade Wholesale Trade Services	le 🔲	Construction Agriculture Manufacturing		Transportation Mining Finance, Insur		G G	
4. Mailing address for future correspondence: JACK TRENT & CO INC. (Name)			indence:	5. Name copy is	and address for (if other than #	or this acknow (4):	ledgment	
				(Name)	TRENT & C		 ಜ	
	6213 N CLOVER		STE 130	(Address)			TE 130 #	
	BOISE (City)	(State)	83713 (Zipcode)	BOIS (City)	<u> </u>	(State)	83713 P (Zipcode)	
Pr	rinted Name: JACK	TRENT			Secretary of	State use only	aWerenc	-
Si	gnature:						ence	
	rinted Name:							
	ignature: rinted Name:						Denney	
	ignosture:						*	

JTC CPA LLP

6213 N Cloverdale Rd, Ste Boise ID 83713

April 15, 2021

Idaho Secretary of State Business Division 450 N 4th Street PO Box 83720 Boise ID 83720-0080

RE: Letter of Consent

JTC CPA LLP give consent to Jack Trent & Co Inc authorization to use the name JTC CPA name as a DBA.

Sincerely,

Jack Trent , Partner

JTC CPA

JT:tf