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(Requestor's Name)
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PICK-UP WAIT MAIL
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S. FRANKLIN JUL 13 2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 799611 8365538
AUTHORIZATION :
COST LIMIT : \$70.00
ORDER DATE : July 12, 2022
ORDER TIME: 1:27 PM
ORDER NO. : 799611-010
CUSTOMER NO: 8365538
FOREIGN FILINGS
'
NAME: JADEV 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: Eyliena Baker EXT#

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JADEV INC.	
	n - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Star above referenced foreign corporation to transact business."	nding" and check are submitted to register the
Please return all correspondence concerning this matte	r to the following:
DANIELA HANKE	
Name of	Person
BP TAX ADVISORY LLC	211
Firm/Con	npany ~~
848 BRICKELL AVE SUITE 203	, -
Addr	ress ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
MIAMI, FL 33131	F
City/State a	and Zip code
SOPORTELLC@BPTAX.COM	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please of	call:
DANIELA HANKE at (400-4975
Name of Person Area Cod	de 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 DEPARTMENT \$\Boxed{\text{\$\text{FIO.00}}}\$ \text{Filing Fee } \text{\$\$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\	T 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.

(If name unavail	able in Florida, enter alternate corporate name ac	dopted for the purpose of transacting b	ousiness in Florida)	
DELAWARE 3.		8-2447626		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
05/06/2022	5			
(Date	of incorporation)	(Date of duration, if other tha	(Date of duration, if other than perpetual)	
·.				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration)		
		22. 1.3., to determine penanty habitity)		
·	AVE SUITE 203, MIAMI, FL 33131 (Principal office	e <u>street</u> address)		
		,	2022	
	(Current mailing	address, if different)	<u></u>	
			; ;=- 	
. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	12	
Name:	BP TAX ADVISORY LLC		P.: 1: -	
Office Address:	848 BRICKELL AVE SUITE 203			
инсе Address:	MAN (1)	22121		
	MIAMI	Florida		
	(City)	(Zip code)		
laving been nam esignated in this urther agree to c	ent's acceptance: sed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rel with and accept the obligations of my posi	ent as registered agent and agree t lative to the proper and complete p	to act in this capac	
		nek		

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 DIANA DE VENGOECHEA ☐ Chairman Name: □Chairman Name: _____ 848 BRICKELL AVE □ Vice Chairman Address: ☐ Vice Chairman Address: SUITE 203 Director □ Director MIAMI, FL □President □President 33131 □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 Address: □Vice Chairman Address: ☐ Vice Chairman □Director □ Director □President □President □Vice President _____ ☐ Vice President □ Secretary □ Treasurer ☐ Secretary □ Treasurer □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. Diana de Vengoechea 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.

. DIANA DE VENGOECHEA



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

DELAWARE, DO HEREBY CERTIFY "JADEV, 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 TWELFTH DAY OF JULY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JADEV, INC." WAS INCORPORATED ON THE SIXTH DAY OF MAY, A.D. 2022.

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

2022 JUL 12 PH 1: 11



Authentication: 203891983

Date: 07-12-22