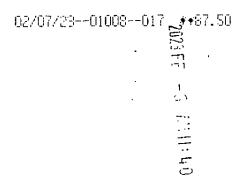
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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



100401654991





S. ROBERTS FEB 1 6 2023

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: JP Homes Inc				
	Name of corporati	on - mus	t include suffix	
Dear Sir or Madam:				
The enclosed "Application by For "Certificate of Existence," or "Cer above referenced foreign corporati	tificate of Good St	anding" :	and check are subi	et Business in Florida." mitted to register the
Please return all correspondence c	oncerning this mat	er to the	following:	
Ashley Piehl				
<u> </u>	Name o	of Person		
JP Homes Inc				
	Firm/Co	mpany	-	
6512 Baum Drive, Ste 1				•
	Add	lress		
Knoxville, TN 37919				
	City/State	and Zip	code	-
jphomestn@gmail.com				
t-mail :	address: (to be used	for futu	re annual report n	otification) ————————————————————————————————————
For further information concerning	this matter, please	call:		
Ashley Piehl	, 865	de) 809-2810 Daytime Telephone Number		
Name of Person	Area Co) ode	Daytime Teleph	none 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		
	ng amount: IDA DEPARTMEN 5 Filing Fee & ficate of Status	□ \$78.7	ATE 5 Filing Fee & fied Copy	S87.50 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.

JP Homes, Inc.		
(Enter name of "Inc.," "Co.," "	corporation; must include "INCORPORATED," Corp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,"
JP Homes FL	Inc	
(If name unava	ilable in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Florida)
2. TN	3 4	7-2042180
(State or coun 4.		(FEI number, if applicable)
	te of incorporation)	(Date of duration, if other than perpetual)
7. 15469 Gulf Blve	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 I. Unit 7, Madiera Beach, FL 33708	lorida, if prior to registration) 2, F.S., to determine penalty liability)
· · · 	(Principal office	street address)
6512 Baum Dri	ve, Ste 1, Knoxville, TN 37919	
	(Current mailing a	nddress, if different)
8. Name and stro	eet address of Florida registered agent: (P.O. I	Box NOT acceptable)
Name:	Ashley Pichl	<u>ب</u> ب
Office Address: 15469 Gulf Blvd, Unit 7		
	Madeira Beach	, Florida 33708
	(City)	(Zip code)

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.

A. DIRECTORS				
□Chairman	James A Piehl II Name:	■ Chairman	Name: Ashley Piehl 6512 Baum Drive, Ste 1 Address:	
□Vice Chairman	Address: 6512 Baum Drive, Ste 1	□Vice Chairman		
Director	Knovville TN 37919		Knoxville, TN 37919	
President		□President	·	
□Vice President		■ Vice President		
□Secretary	□Treasurer	■ Secretary	□Treasurer	
□Other	Other	■Other CFO	□Other	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□Presidem		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary	□Treasurer	
□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: I individuals may be	Jse an attachment to report more than six (6). The added to the index when filing your Florida Department of Direct Signature of Direct	rtment of State Annual Rep	for reporting purposes only. Non-indexed port form.	
The officer or direct she is aware that fall s.817.155, F.S.	tor signing this document (and who is listed in nur lse information submitted in a document to the De	mber 11 above) affirms tha partment of State constitut	a the facts stated herein are true and that he or es a third degree felony as provided for in	
13. Ashley Piehl				



Division of Business Services **Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

ASHLEY PIEHL

STE 1

6512 BAUM DRIVE

KNOXVILLE, TN 37919

Request Type: Certificate of Existence/Authorization

Request #:

0513504

Issuance Date: 01/27/2023

Copies Requested:

Document Receipt

Receipt #: 007741952

Payment-Credit Card - State Payment Center - CC #: 3844130267

Filing Fee:

\$20.00

\$20.00

January 27, 2023

Regarding:

JP Homes, Inc.

Filing Type:

For-profit Corporation - Domestic

Formation/Qualification Date: 09/22/2014

Status:

Active

Duration Term:

Perpetual

Business County: KNOX COUNTY

Control #:

772473

Date Formed:

10/01/2014

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

JP Homes, Inc.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User

Verification #: 058543626