

F23000004399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

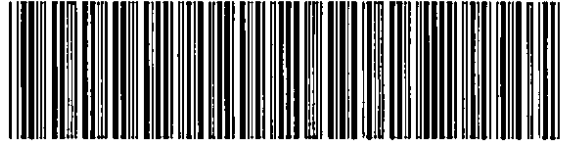
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2023 JUL 25 PM 5:40

SECRETARY OF STATE  
TALMADGE BUILDING  
COLUMBUS, OH 43260




2023 JUL 25 PM 11:35

JUL 24 2023

K. Brumbley

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 895123 7945229  
AUTHORIZATION :   
COST LIMIT : \$ 70.00

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ORDER DATE : July 25, 2023  
ORDER TIME : 9:34 AM  
ORDER NO. : 895123-005  
CUSTOMER NO: 7945229

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FOREIGN FILINGS

NAME: JEMNI, 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: Alexxis Weiland-sorenson -- EXT#

EXAMINER: \_\_\_\_\_

# 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. JEMNI, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Minnesota 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 07/17/2008 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. April 12, 2023  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 8191 Wilshire Lakes Blvd, Naples, FL 34109  
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Brandon Hlavka

Office Address: 8191 Wilshire Lakes Blvd.

Naples, Florida 34109  
(City) (Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.*

By: \_\_\_\_\_

DocuSigned by:

Brandon Hlavka  
(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**☐ Chairman Name: \_\_\_\_\_☐ Vice Chairman Address: \_\_\_\_\_☒ Director Brandon Hlavka  
8191 Wilshire Lakes Blvd, Naples, FL 34109☒ President \_\_\_\_\_☐ Vice President \_\_\_\_\_☐ Secretary ☐ Treasurer☒ Other CEO ☐ Other \_\_\_\_\_☐ Chairman Name: \_\_\_\_\_☐ Vice Chairman Address: \_\_\_\_\_☐ Director \_\_\_\_\_☐ President \_\_\_\_\_☐ Vice President \_\_\_\_\_☐ Secretary ☐ Treasurer☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_☐ Chairman Name: \_\_\_\_\_☐ Vice Chairman Address: \_\_\_\_\_☐ Director \_\_\_\_\_☐ President \_\_\_\_\_☐ Vice President \_\_\_\_\_☐ Secretary ☐ Treasurer☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_☐ Chairman Name: \_\_\_\_\_☐ Vice Chairman Address: \_\_\_\_\_☐ Director \_\_\_\_\_☐ President \_\_\_\_\_☐ Vice President \_\_\_\_\_☐ Secretary ☐ Treasurer☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_☐ Chairman Name: \_\_\_\_\_☐ Vice Chairman Address: \_\_\_\_\_☐ Director \_\_\_\_\_☐ President \_\_\_\_\_☐ Vice President \_\_\_\_\_☐ Secretary ☐ Treasurer☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_☐ Chairman Name: \_\_\_\_\_☐ Vice Chairman Address: \_\_\_\_\_☐ Director \_\_\_\_\_☐ President \_\_\_\_\_☐ Vice President \_\_\_\_\_☐ Secretary ☐ Treasurer☐ 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. Brandon Hlavka  
CSBCEFA2C8BC486... 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.

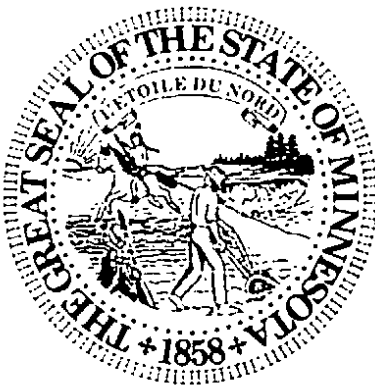
13. Brandon Hlavka, President/CEO  
(Typed or printed name and capacity of person signing application)

**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: JEMNI, INC.  
Date Filed: 07/17/2008  
File Number: 2935196-2  
Minnesota Statutes, Chapter: 302A  
Home Jurisdiction: Minnesota

This certificate has been issued on: 07/24/2023



A handwritten signature in black ink that reads "Steve Simon".

Steve Simon  
Secretary of State  
State of Minnesota