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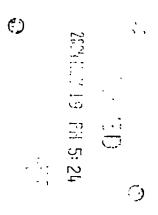
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone i	4)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)	_
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

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T. LEMIEUX DEC 17 2024

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: JOG060 Holdings, Inc.			
	`corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp"Certificate of Existence," or "Certificate of above referenced foreign corporation to tra	f Good Stand	ling" and check are submi	
Please return all correspondence concerning	g this matter	to the following:	
Sharon Thomson			
	Name of F	erson	
JOG060 Holdings, Inc.			
	Firm/Comp	pany	
1037 Enfilar Lane			
	Addres	SS	
Arlington, TX 76017			
	City/State an	d Zip code	
sharonthomson1@yahoo.com			
E-mail address:	(to be used fo	or future annual report not	ification)
For further information concerning this mat	tter, please ca	all:	
Sharon Thomson	281 t (840-1231	
Name of Person	Area Code		ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations
Enclosed is a check for the following amou Please make check payable to: FLORIDA DEF \$70.00 Filing Fee \$78.75 Filing Certificate of	PARTMENT Fee &		 \$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.

JOG060 Holding					_
(If name unavaila	ble in Florida, enter alternate corporate name		acting business	s in Florida)	
2. Delaware	3. y under the law of which it is incorporated)	93-1790179 (FEI number,			_
	under the law of which it is incorporated)	(FEI number,			
4. June 7, 2023	5.	93-1790179 (Date of duration, if o			-
(Date	of incorporation)	(Date of duration, if o	ther than perpe	rtual)	
6					
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty li			
_ 15450 Grumman	Crt, Wellington, FL 33414	,	• • • • • • • • • • • • • • • • • • • •		
/		ice street address)	\odot		- 💢
1037 Enfilar Lan	e, Arlington, TX 76017	-	• •	199 192	
<u> </u>	(Current maili	ng address, if different)	-		
				- <u>-</u>	-
8. Name and stree	t address of Florida registered agent: (P.0	O. Box <u>NOT</u> acceptable)			. ;
Name:	Sharon Thomson				
	15450 Grumman Crt			5: 2	
Office Address:				t-	43
	Wellington	, Florida	_		
	(City)	(Zip code)			
designated in this	(City) ont's acceptance: ed as registered agent and to accept serve application, I hereby accept the appoints omply with the provisions of all statutes i	(Zip code) ice of process for the above s ment as registered agent and	agree to act i	in this capa	icit

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: Hasmet Topcuoglu	□Chairman	Name: Sharon	Thomson	
□Vice Chairman	Address:	□Vice Chairman	Address:	Enfilar Lane	
□Director	Sunny Isles, FL 33160	□Director	Arlington, TX	76017	
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	
□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	<u>.</u>	□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.					
12	Signature of Director or		-	· <u>-</u>	
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. Sharen Thomson, Secretary					
Sharon Thomson, Secretary					

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "JOGO 60 HOLDINGS, 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 EIGHTH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JOG060 HOLDINGS, INC." WAS INCORPORATED ON THE SEVENTH DAY OF JUNE, A.D. 2023.

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

Authentication: 204829061

Date: 11-08-24

7502177 8300 SR# 20244163801