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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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#### **COVER LETTER**

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TO: Registration Section Division of Corporations						
SUBJECT:	PJAM	GROUP, LLC				
	(Name of Limited I	Liability Company)				
Florida," Cert		pility Company for Authorization to Transact Business in omitted to register the above referenced foreign limited				
Please return	all correspondence concerning this ma	atter to the following:				
	LOUIS M. MEINERS, JR.					
	(Nam	e of Person)				
	ADVOCATE CONSULTING					
	(Firm	n/Company)				
		ES ROW, SUITE 245				
	(1	Address)				
	INDIANAPO	LIS, IN 46240				
		te and Zip Code)				
For further in	formation concerning this matter, plea	ase call:				
	YOLANDA ROBINSON	at (317) 581-4077				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
MAI	LING ADDRESS:	STREET ADDRESS:				
	ion of Corporations	Division of Corporations				
	Box 6327 nassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
	check for the following amount: 5.00 Filing Fee \$\square\$ \$130.00 Filing Fee & Certificate of \$\square\$	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Cop				

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: PJAM GROUP, LLC (Name of Foreign Limited Liability Company) NEVADA (Jurisdiction under the law of which foreign limited liability company is organized) MAY 31, 2006 PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") UPON QUALIFICATION (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 25911 HICKORY BLVD., STE 2 BONITA SPRINGS, FL 34134 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: DENNIS SHERMAN JENNA SHERMAN 25911 HICKORY BLVD., STE 2 25911 HICKORY BLVD., STE 2 BONITA SPRINGS, FL 34134 BONITA SPRINGS, FL 34134 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: ASSET MANAGEMENT Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes

an affirmation under the penalties of perjury that the facts stated herein are true.)

LOUIS M. MEINERS, JR.

Typed or printed name of signee

STF FL32231F.2

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of th	e Limited Liability Compan	y is:				
PJAM GROUP, L	LC					
2. The name and	the Florida street address of	the registered a	gent and office are:			
	LOUIS N	4. MEINERS,	JR			
-		(Name)				
_	3073 HORSESHOE DRIVE SOUTH, SUITE 210					
Florida Street Address (P.O. Box NOT ACCEPTABLE)						
_	NAPLES	FL	34104			
_	(	City/State/Zip				

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

6 JUN 15 PM 3: 4

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **PJAM GROUP**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 31, 2006, and is in good standing in this state.

MAN HE COMMING THE PROPERTY OF THE PROPERTY OF

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 1, 2006.

DEAN HELLER Secretary of State

Ву

Certification Clerk

SECRETARY OF

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APPHOVEU