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SEGRETARY OF STATE

T. CLINE

OCT - 1 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JFK FNVESTMER (Name of Lin	mited Liability Company)
The enclosed "Application by Foreign Limited Li Florida," Certificate of Existence, and check are s liability company to transact business in Florida	iability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited
Please return all correspondence concerning this r	matter to the following:
- Cottv	ICENNEALY Jame of Person)
JFK	irm/Company)
809 HIGHLAND	(Address)
Solawa Boach (City/S	CA 92075 FEB SE TI
For further information concerning this matter, ple	ease call:
JOHN KENNEALLY (Name of Person)	at (617) 312 1442 55 5 6 (Area Code & Daytime Telephone Number) 8
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum_{\cup \}\$125.00 Filing Fee \tag{\text{\text{Certificate of }}}\$	

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

	COMPILANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TIED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
١	JFK INVESTMENTS, UC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	(Name of Foreign Limited Liability Company; mifst include "Limited Liability Company," "L.L.C.," or "LLC.,")
cons	ame unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability apany," "L.L.C.," "LLC.")
	DELAWARE urisdiction under the law of which foreign limited liability ompany is organized) (FEI number, if applicable)
cc	ompany is organized)
4	9/34/08 5. Personal (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6	(Date first transacted business in Florida, if prior to registration.)
7.	(See sections 608,501 & 608,502 F.S. to determine penalty liability)
_	89 HGHLAND DAUE Schwa Back CA 93045 FM B (Street Address of Principal Office) Filmited liability company is a manager-managed company, check here
	The name and usual business addresses of the managing members or managers are as follows.
•	809 HIGHCANS DEINE
	SUMA BEACH CA 92075
the ju	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in urisdiction, under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)
11.	Nature of business or purposes to be conducted or promoted in Florida: REAL ESTATE
_	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.) SHO KENNEACLY
	Typed or printed name of signee

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 the Limited Liability Company is:	
JEK INVESTMENTS, ZLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office a	are:
NEO KIMMELMAN, P.A.	
4755 TECHNOLOGY WAY SLITE Florida Sirem Address (P.O. Box NOT ACCEPTABLE)	2008 SEP 30 SECRETARY TALLAHASSE
BOCA RATON 11. 33431	SEP 30 AH II CRETARY OF S AHASSEE, FL
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate. I hereby accept the a agent and agree to act in this equality. I further agree to comply with the proviscelating to the proper and complete performance of my duties, and I am familiar obligations of my position as agreststered agent as provided for in Chapter 608. Fi	above stated limited appointment as registered as includes with and accept the
Signocures 9/29/08	
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Age	nt
\$ 30.00 Certified Copy (optional)	

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JFK INVESTMENTS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2008.

4604828 8300 080987020 You may verify this certificate online at corp.delaware.gov/authver.shtml

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6875427

DATE: 09-25-08