M0900000669

| (Re | questor's Name) | ., |
|------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | #) |
| PłCK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| | | |

Special Instructions to Filing Officer:

FEB 18 2009

EXAMINER

Office Use Only



400141708114

01/23/09--01041--002 **125.00



January 26, 2009

VICTOR E. LEONINO 13325 BONICA WAY WINDERMERE, FL 34786

SUBJECT: J V PROPERTIES, LLC Ref. Number: W09000003850

We have received your document for J V PROPERTIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 109A00002738

COVER LETTER

Registration Section Division of Corporations

TO:

| SUBJECT: JV PROPERTIES LLC (Name of Limited Liability Company) |
|---|
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida |
| Please return all correspondence concerning this matter to the following: |
| VICTOR E. LEONINO (Name of Person) |
| (Name of Person) |
| JV PROPERTIES, LLC (Firm/Company) |
| (Firm/Company) 결상 걸 |
| (Firm/Company) // 3325 Bonica Way (Address) |
| (Address) |
| WINDERMERE FL 34786 SE NO CO |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| |
| VICTOR LEONINO at (407) 423-5060 (Name of Person) (Area Code & Daytime Telephone Number) |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| MAILING ADDRESS: STREET ADDRESS: |
| Division of Corporations Division of Corporations |
| P.O. Box 6327 Clifton Building |
| Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is archeck for the following amount: \$\sum_\$125.00 \text{Filing Fee} \sum_\$130.00 \text{Filing Fee & \sum_\$160.00 \text{Filing Fee, Certificate}} Certificate of Status Certified Copy of Status & Certified Copy |

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

| We, the undersigned, do hereby certify that we are the Managers and/or Managing |
|--|
| Members of The Repell LLC (Name of Limited Liability Company) |
| (Tame of Emmed Embridge Company) |
| a limited liability company duly organized and existing under the laws of |
| Yennsulvania. |
| Pennsylvania (State or Country of Organization) |
| Because the name of this foreign limited liability company does not satisfy the the things are the same of this foreign limited liability company does not satisfy the things are the same of this foreign limited liability company does not satisfy the things are the same of this foreign limited liability company does not satisfy the things are the same of this foreign limited liability company does not satisfy the things are the same of this foreign limited liability company does not satisfy the things are the same of this foreign limited liability company does not satisfy the things are the same of this same are the same of |
| requirements of the s. 608.406, F.S., the limited liability company hereby adopts the |
| following name to transact business in the state of Florida: |
| (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.) |
| Date: $2 - 3 - 09$ |
| Signature(s) of Manager(s) and/or Managing Member(s): |
| Just Leon |
| |
| |
| |
| |
| |
| |

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:

| (Maine of I | ioraian Limited Kiahilit | LLC y Company; must includ | a "I imited I iobilit | v Company " "I I (| ~ " ~ "[[C " | |
|--|--|---|---|--|--|---|
| _ | PAUPERTKE | | C Emilied Diability | y Company, L.L.C | o., or lie. | |
| (If name unavailab | ole, enter alternate name | adopted for the purpose mbers adopting the altern | | | | |
| 2. PENNS (Jurisdiction un company is organical) | YLVANIA der the law of which fo anized) | 3. reign limited liability | 02-C | 06056/6 El number, if applic | able) | |
| | | 5. | PERPE | TUAL limited liability con | | |
| 6 | | √/A ansacted business in Flor | exist or "perpeti | ual") | 200s | ···· |
| 7. | (See sections 6 | 08.501 & 608.502 F.S. t | to determine penalt | y liability) | MILAHASS | Commence Com |
| | ORLANDO | FL 34786 (Street Address o | , | | 7 PH 2: 33 | _ |
| 8. If limited lia | | (Street Address o | | $\overline{}$ | 2: 33 | |
| | | ldresses of the mana | | - | | |
| | | June MOMAG | K 13325 | BONICA WAY | ORLANDO | FL |
| VIC | TOR E. LEDI | NINU FIEFIPE | 10000 | - J | / 91/[1 | / |
| JODEE | TOR E.LEO, KAYTON-LE | ONINO MEMBE | DL 13325 | BONICA WA | 14786 14 | + k |
| JODEE | TOR E.LEON | ONINO HEMBE | DR 13325 | BONICA WA | 34786 FL 3478 | + |
| 10. Attached is an o | original certificate of exis ler the law of which it is o | tence, no more than 90 da organized. (A photocopy e translator must be submi | rys old, duly authent is not acceptable. If | icated by the official 1 | having custody of r | ecords in |
| 10. Attached is and the jurisdiction und translation of the co | original certificate of exis ler the law of which it is o artificate under oath of the | tence, no more than 90 da organized. (A photocopy | rys old, duly authent is not acceptable. If itted.) | icated by the official I the certificate is in a | having custody of r | ecords in |
| 10. Attached is and the jurisdiction und translation of the co | original certificate of exis ler the law of which it is o artificate under oath of the | tence, no more than 90 da organized. (A photocopy e translator must be submi | rys old, duly authent is not acceptable. If itted.) | icated by the official I the certificate is in a | having custody of r | ecords in |
| 10. Attached is and the jurisdiction und translation of the co | original certificate of exister the law of which it is on the certificate under eath of the cusiness or purposes | tence, no more than 90 da organized. (A photocopy e translator must be submi to be conducted or p | nys old, duly authent is not acceptable. If itted.) promoted in Flo | icated by the official l the certificate is in a rida: | having custody of r foreign language, a | ecords in |
| 10. Attached is and the jurisdiction und translation of the co | original certificate of exister the law of which it is certificate under oath of the outliness or purposes L PLOPELT Signature of (In accordance w | tence, no more than 90 da organized. (A photocopy e translator must be submi | nys old, duly authent is not acceptable. If itted.) promoted in Flo norized represen ,, the execution of thi | icated by the official I the certificate is in a rida: | having custody of r foreign language, a | ecords in |
| 10. Attached is and the jurisdiction und translation of the co | original certificate of exister the law of which it is certificate under oath of the cusiness or purposes Signature of (In accordance wan affirmation under oath of usine secondance wan affirmation under oath of the certificate under oath of the certificate of | tence, no more than 90 da organized. (A photocopy e translator must be submit to be conducted or placed to be conducted or placed a member or an authorith section 608.408(3), F.S. | nys old, duly authent is not acceptable. If itted.) promoted in Flo promoted in Flo norized represen the execution of this y that the facts stated | icated by the official I the certificate is in a rida: | having custody of r foreign language, a | ecords in |

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: | | |
|--|-------------|--|
| JV PROPERTIES, LLC | | _ |
| 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 are: VICTOR E. LEWINO | 2009 FEB 17 | —— ಹಿ.ಮೃಸಕ್ಕ |
| (Name) | 田田田 | Oversion with the party of the |
| 13325 BONICA WAY | 1.1 | 1 |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | PH 2: | |
| ORLAND FL 34784 City/State/Zip | 2: 33 | |
| | | |

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)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JANUARY 15, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

JV PROPERTIES, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 7837004-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp