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#### COVER LETTER

	egistration Section livision of Corporations
	TENN COM LLC
SUBJEC"	r: JENN COM LLC  Name of Limited Liability Company
The enclo Existence,	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please reti	arn all correspondence concerning this matter to the following:
	JOAN COMERIE
	Name of Person
	JENN COM LLC Firm/Company
	Firm/Company
	9024 SW 214th ST. Address
	Address
	CUTLER BAY FL. 33189  City/State and Zip Code
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
	E-mail address: (to be used for future annual report nonfication)
For furthe	r information concerning this matter, please call:
	Name of Person Area Code & Daytime Telephone Number
	Name of Person Area Code & Daytime Telephone Number
D	IAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
	egistration Section Registration Section O. Box 6327 Clifton Building
	allahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
	l is a check for the following amount:  125.00 Filing Fee  Certificate of Status  S155.00 Filing Fee & S160.00 Filing Fee, Certificate Certificate of Status

### 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: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") STATE OF NEVADA
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) 4. 2/9/2010 (Date/of Organization) (Duration: Year limited liability company will cease to (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 9024 SW 214th ST.

CUTLER BAY FL. 33189

(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: JOAN COMERIE (MANAGER)

9024 SW 214th ST. CUTLER BAY. 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: 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. I am aware that any 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.) JOAN E. COMERIE

Typed or printed name of signee

2011-07-14 14:14

>> 
PUKSUANT 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.

I. The name of the Limited Liability Company is:
JENN LLC
If unavailable, the alternate to be used in the state of Florida is:
JENN COM LLC
2. The name and the Florida street address of the registered agent and office are:
NRAI SERVICES INC
· •
515 EAST PARK AVENUE  Florida Street Address (P.O. Box NOT ACCEPTABLE)
Florida Street Address (P.O. Box NOT ACCEPTABLE)
TALLAHASSEE FL 3,2301
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.  NEPICES VICES, VICE
by Kindow Klemencie
( \ (Signature)  Lindsey Riemencic, Assistant Secretary
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

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

We, the undersigned,	do hereby certify th	hat we are the Managers and/or Managing
Members of	MA	TENN LL C mited Liability Company)
	(Name of Lin	nited Liability Company)
a limited liability con	npany duly organize	ed and existing under the laws of
NEVAD	A Country of Organization)	
(State or C	Country of Organization)	
Because the name of	this foreign limited	liability company does not satisfy the
requirements of the s	. 608.406, F.S., the	limited liability company hereby adopts the
following name to tra		
JENN	com LLC	ida. NOTE: Name must end with Limited Liability
(Name to be used by limited Company, L.L.C., or LLC.)	liability company in Flori	da. NOTE: Name must end with Limited Liability
Date: 6. 75.	// .	
Signature(s) of Mana	ger(s) and/or Manag	ging Member(s):
gConeve.		managen.
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## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, **JENN**, **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 December 19, 2010, and is in good standing in this state.

FAL OF THE STATE O

ROSS MILLER Secretary of State

office on June 14, 2011.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

Electronic Certificate
Certificate Number: C20110614-3249
You may verify this electronic certificate
online at http://www.nvsos.gov/