M13000007763

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SECRETARY OF STATE FLORIDA

B. BOSTICK
MAY - 2 2013
EXAMINER

CR2E027 (9/10)

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:	JM3 Construction, 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:

Joseph R	evello					
JM3 Con	JM3 Construction, LLC					
	Firm/Company					
521 New	man Springs R	d, Ste 11				
		Address	·			
Lincroft,	NJ 07738					
	City/S	tate and Zip Code		7 2		
tax@davi	dsonteam.com			2013 MAY - SECRETAF	-17	
	E-mail address: (to be use	for future annual repo	ort notification)	THE A	1 [
For further information concerning	g this matter, please call:			938 -		
Margery S. Da	vidson, CPA	732 ;	583-7674	AM II: 02 OF STATE E, FLORIDI	O	
Name	of Person Are	a Code & Daytime Tel	ephone Number	: 02		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divisio Regist Cliftor 2661 E	ET ADDRESS: on of Corporations ration Section Building executive Center Circle assee, FL 32301		,		
Enclosed is a check for the f						
■ \$125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing F Certified Copy		ling Fee, Certificate Certified Copy	е	

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 RUSINESS IN THE STATE OF FLORIDA:

<i>LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN T</i> 1 JM3 Construction, LLC	ТНЕ	STATE OF FLORIDA:	
(Name of Foreign Limited Liability Company; must inc	clude	"Limited Liability Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter alternate name adopted for the pur consent of the managers or managing members adopting the a Company," "L.L.C," "LLC.")	pose Itern	of transacting business in Florida and at ate name. The alternate name must include	tach a copy of the written de "Limited Liability
_{2.} New Jersey	3.	80-0906610	
(Jurisdiction under the law of which foreign limited liability company is organized)	ý	(FEI number, if applicab	le)
4. 03/20/2013	5.	Perpetual	
(Date of Organization)			
6. Not applicable			
(Date first transacted business in (See sections 608.501 & 608.502 to	Flor	ida, if prior to registration.) o determine penalty liability)	=1 ~
7. 521 Newman Springs Road, Ste 11		20131 SEU	
Lincroft, NJ 07738			HE A
•	ess o	f Principal Office)	SSEA - L
 If limited liability company is a manager-manage The name and usual business addresses of the manage Joseph Revello, 521 Newman Springs I 	ana	ging members or managers are as	
10. Attached is an original certificate of existence, no more than the jurisdiction under the law of which it is organized. (A photo			

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.

	f the Limited Liability Company is: truction, LLC			
If unavailable,	the alternate to be used in the state of Florida is:			
2. The name a	nd the Florida street address of the registered agent and office are:			
	Josephine Otello			
	(Name)	-		
	1000 NE 4th Street	SEC	2013	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	RETA	ΥAΥ	T
	Hallandale _{FL} 33009-3523	SSEE,	<u></u>	
	City/State/Zip		X	
liability compa registered ager statutes relatin	amed as registered agent and to accept service of process for the above some at the place designated in this certificate, I hereby accept the appoint at and agree to act in this capacity. I further agree to comply with the progression of the proper and complete performance of my duties, and I am familia gations of my position as registered agent as provided for in Chapter 60 (Signature)	tment as rovisions c ar with an	of all d	

Filing Fee for Application
Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

\$ 100.00

\$ 25.00 \$ 30.00

5.00

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

JM3 CONSTRUCTION LLC

0400559077

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on March 20, 2013.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Margery S. Davidson, Cpa 19 Ingram Circle Aberdeen, NJ 07747 1714



Certification# 128178834

IN TESTIMONY WHEREOFF have hereunto set my hand and affixed my Official Seal at Trenton, this SSE 26th day of April, 2013

AHI: 02

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 3, 2013

JOSEPH REVELLO 521 NEWMAN SPRINGS ROAD SUITE 11 LINCROFT, NJ 07738

SUBJECT: JM3 CONSTRUCTION, LLC

Ref. Number: W13000019518

SECRETARY OF STATE TALLAHASSEE, FLORING

We have received your document for JM3 CONSTRUCTION, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 913A00007873