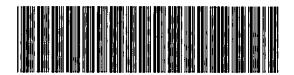
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(Requestor's Name)
(Address)
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<u>_</u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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May 23, 2014

DENNIS LYON 1072 NORWICH RD PLAINFIELD, CT 06374

SUBJECT: JAR-DEN LYON LLC Ref. Number: W14000032614

We have received your document for JAR-DEN LYON LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 914A00011237

COVER LETTER

	ON LLC Name of Limited Liability Company
	Name of Childed Liability Company
The enclosed "Application by Foreign Limi Existence, and check are submitted to regist	ited Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning	g this matter to the following:
Dennis Lyor	n
	Name of Person
Jar-Den Lyc	on LLC
	Firm/Company
1072 Norwi	ch Rd
	Address
Plainfield C	
	City/State and Zip Code
al a sa sa la la sa sa <i>C</i>	D = b = ml = b = 1 m = 4
_	Dsbcglobal.net
E-mail	address: (to be used for future annual report notification)
For further information concerning this mat	l address: (to be used for future annual report notification) ter, please call:
E-mail	address: (to be used for future annual report notification)
For further information concerning this mat	Taddress: (to be used for future annual report notification) ter, please call: at (860) 334-7539
E-mail For further information concerning this mat Dennis Lyon Name of Contact I	Taddress: (to be used for future annual report notification) ter, please call: at (860
E-mail For further information concerning this mat Dennis Lyon Name of Contact I MAILING ADDRESS: Division of Corporations Registration Section	Taddress: (to be used for future annual report notification) ter, please call: at (860) Area Code Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section
E-mail For further information concerning this mat Dennis Lyon Name of Contact I MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	Taddress: (to be used for future annual report notification) ter, please call: at (860 at Code Daytime Telephone Number) STREET ADDRESS: Division of Corporations Registration Section Clifton Building
E-mail For further information concerning this mat Dennis Lyon Name of Contact I MAILING ADDRESS: Division of Corporations Registration Section	Taddress: (to be used for future annual report notification) ter, please call: at (860) Area Code Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section
E-mail For further information concerning this mat Dennis Lyon Name of Contact II MAILING ADDRESS; Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following	Taddress: (to be used for future annual report notification) ter, please call: at (860 Area Code) Person STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

JAR-DEN LYON LLC			
(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. The alternate Liability Company," "L.L.C," or "LLC.")	name must inc	lude "L	 imited
_{2.} Connecticut, USA _{3.} 45-3626251			
(Jurisdiction under the law of which foreign limited liability (FEI number, if app company is organized)	licable)		_
4. (Date first transacted business in Florida, if prior to registration.)			_
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 1072 Norwich RZ			
Plaintield C7, 06374			_
(Street Address of Principal Office)			
6. 1072 Norwich 122			_
Plun fiels C7 063>4			
(Mailing Address)	6.		
7. The name, title or capacity and address of the person(s) who has/have authority to	manage is/a	are:≓	
Dennis Lyon-Owner			_ ************************************
1072 Norwich Rd, Plainfield Ct 06374	A Kong	2-	in Walker The Pipe The
	ا الم	- 	
		p+	harmon .
8. Attached is an original certificate of existence, no more than 90 days old, duly authorated custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate under the submitted)	photocopy	is not	;
5/12/2014			
Signature of an authorized person In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of person aware that any false information submitted in a document to the Department of State constitutes a third degree felony as pro	ury that the facts vided for in s.817	stated he	erein are true. 5.)
Dennis Lyon			
Typed or printed name of signee	_ _		

... CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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: JAR-DEN LYON LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Dennis Lyon	
7400 Castanea Dr Florida Street Address (P.O. Box NOT ACCEPTABLE) Purt Richy FL 34668	The state of the s
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 605, Florida Statutes. \$ 100.00 Filing Fee for Application	The state of the s
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)	

_,Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

JAR-DEN LYON LLC

a domestic limited liability company, were filed in this office on October 17, 2011.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: May 08, 2014

TALLARYSSECTION OF THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE

Business ID: 1051197 Express Certificate Number: 2014137618001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov