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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. ROBERT ZOCHOWSKI, J.D., L.L.M.
COUNSELLOR AT LAW

MEMBER D.C., N.J., N.Y. & FL. BAR

HAAS BLDG. SUITE 400
1001 N. U.S. HIGHWAY ONE
JUPITER, FLORIDA 33477
561-744-1175
FAX 561-744-6333

P.O. BOX 33
PRINCETON JUNCTION, N.J. 08550
609-799-2111
FAX 609-799-7563

PLEASE REPLY TO Jupiter

July 31, 2014

VIA Federal Express
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: JAJ GROUP, LLC

Dear Sir or Madam:

Enclosed please find the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida and Certificate of Designation of Registered Agent concerning the above limited liability company.

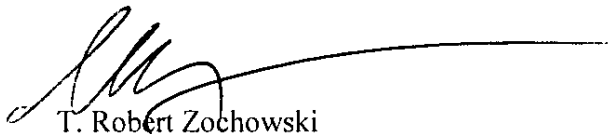
Also enclosed please find a check in the amount of \$155.00 representing the filing fee and fee for certified copy of Certificate of Status.

Please return all correspondence concerning this matter to:

T. Robert Zochowski, Esq.
Suite 400, 1001 N. U.S. Highway One
Jupiter, FL 33477

If you have any questions, please advise.

Very truly yours,


T. Robert Zochowski
TRZ/sb
Enclosures

cc: Edward M. Kane

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JAJ GROUP 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:

T. Robert Zochowski, Esq.

Name of Person

T. Robert Zochowski, Esq.

Firm/Company

1001 N. US Hwy One, Suite 400

Address

Jupiter, FL 33477

City/State and Zip Code

dallasjaj@comcast.net

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

T. Robert Zochowski, Esq. at (561) 744-1175
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☒ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**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:

 JAJ GROUP 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:

 Edward M. Kane

(Name)

 2403 Captains Way

 Florida Street Address (P.O. Box NOT ACCEPTABLE)

 Jupiter, FL 33477

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 605, Florida Statutes.



(Signature)

Edward M. Kane

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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STATE
TALLAHASSEE, FLORIDA

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

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

1. JAJ GROUP 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 name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Pennsylvania 3. 20-0429001
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability)

5. 2403 Captains Way
Jupiter, FL 33477
(Street Address of Principal Office)

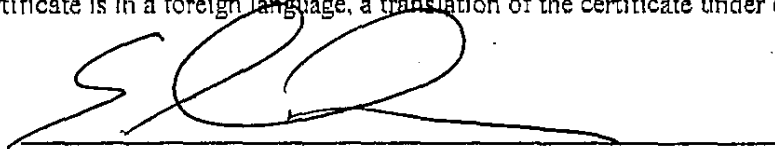
6. _____
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Edward M. Kane, President/Manager

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SEC. 1
ALLAHABAD, INDIA

8. 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)



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 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.)

Edward M. Kane

Typed or printed name of signee

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

JULY 30, 2014

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

JAJ GROUP 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.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.

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SECRETARY OF STATE
JALAHABADI BRIDA



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.

Carol Aichele

Secretary of the Commonwealth

Certification Number: 12015936-1

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