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COVER LETTER

TO: Re

Registration Section Division of Corporations

SUBJECTS

MJ ALTON INVESTMENTS, 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:

JOANNE TAYLOR

Name of Person

MJ ALTON INVESTMENTS, LLC

Firm/Company

3953 ARLINGTON DRIVE

Addres

PALM HARBOR FL 34685

City/State and Zip Code

ALTON.INVESTMENTS@AOL.COM

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

For further information concerning this matter, please call:

JOANNE TAYLOR

127

741-0592

See 19 10 10 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

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:

1. MJ ALTON INVESTMENTS, LLC (Name of Foreign Limited Liability Company; must include "Limited")	ed Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting be Liability Company," "L.L.C," or "LLC.")	business in Florida. The alternate name must include "Limit	ted
_{2.} NEVADA 3.		
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
4. UPON QUALIFICATION	prior to registration	·
(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to det	prior to registration.) termine penalty liability)	ع مون د دیدو
_{5.} 701 N GREEN VALLEY PKWY STE 2	00 SEA 2	`\\
HENDERSON, NV 89074		, 4 4
(Street Address of Princip. and Address of Princip. 6. 2953 ARLINGTON DRIVE	al Office)	
PALM HARBOR, FL 34685		
(Mailing Address)	
7. The name, title or capacity and address of the person(s) wh	no has/have authority to manage is/are:	
JOANNE TAYLOR. MANAGER, 3953 ARLINGTON	DRIVE. PALM HARBOR, FL 34685	
MICHAEL WEISS. MANAGER, 3953 ARLINGTON I	DRIVE. PALM HARBOR, FL 34685	
and the second s	and the second of the second	. ,
8. Attached is an original certificate of existence, no more that having custody of records in the jurisdiction under the law of vacceptable. If the certificate is in a foreign language, a translat must be submitted) August March Mar	which it is organized. (A photocopy is not	

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.)

JOANNE TAYLOR

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: MJ ALTON INVESTMENTS, LLC			
If unavailable, the alternate to be used in the state of Florida is:	- <u>E</u> e	201	
2. The name and the Florida street address of the registered agent and office are:	CALLAN	4 NOV -3	
JOANNE TAYLOR	Y BF S		

3953 ARLINGTON DRIVE

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

PALM HARBOR
FL 34685
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)

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

SECRETARY OF STATE



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, MJ ALTON INVESTMENTS, 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 September 17, 2014, and is in good standing in this state.

THE STATE OF THE S

office on October 27, 2014.

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

ROSS MILLER Secretary of State

Electronic Certificate
Certificate Number: C20141027-1435
You may verify this electronic certificate
online at http://www.nvsos.gov/