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T. HAMPTON

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	INC. 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666				
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X	РНОТОСОРУ				
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×	FILING Foreign LLC				
Ç	JRM FRESH START, LLC (CORPORATE NAME AND DOCUMENT#)				
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PECL	AL INSTRUCTIONS:				
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1.

COVER LETTER

SUBJECT:	JRM FRESH START, LLC				
oomiser	Name	of Limited Liability Company			
The enclosed Existence, and	"Application by Foreign Limited Liabi I check are submitted to register the ab	lity Company for Authorization to Transact Business in Plorida," Certificate of ove referenced foreign limited liability company to transact business in Plorida.			
Please return a	all correspondence concerning this mat	ter to the following:			
	LINDA D. WAINWRIGHT				
		Name of Person			
	TAFT STETTINIUS & HOLLISTI	ER LLP			
		Firm/Company			
	111 E. WACKER DRIVE, STE 2	800 .			
	Address				
	CHICAGO, IL 60601				
		City/State and Zip Code			
	lwainwright@taftlaw.com				
	E-mail address: (to be used for future annual report notification)			
For Airther inf	formation concerning this matter, please	e call:			
LIN	DA D. WAINWRIGHT	at (312) 836-4075			
	Name of Contact Person	Area Code Daytime Telephone Number			
Divis Regis P.O. 1	LING ADDRESS: ion of Corporations stration Section Box 6327 hassec, FL 32314	STREET ADDRESS: Division of Corporations Rogistration Section Clifton Building 2661 Executive Center Circle Tallahasseo, FL 32301			
Enclosed is	a check for the following amoun 25.00 Filing Fee	Fee & \$\Bigcup \$155.00 Filing Pee & \$\Bigcup \$160.00 Filing Fee, Certificate			

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. JRM Fresh Start, LLC (Name of Foreign Limited Liabi	ility Company; must include "Limited Liability Company," "L.	L.C.," or "LLC."
(If name unavailable, enter alternate name add Liability Company," "L.L.C," or "LLC,"	opted for the purpose of transacting business in Florida. The alto	ernate name must include "Limited
2. ILLINOIS	3.	
(Jurisdiction under the law of which foreign company is organized)	n limited liability (FEI number, i	(applicable)
4. N/A		
(Date li (See soction	rst fransacted business in Florida, if prior to registration.) ns 605,0904 & 605,0905, F.S. to determine penalty liability)	TA IA
5. 8444 S. Oketo Aven	ue	<u> </u>
Bridgeview, Illinois 6		C 30 HASS
_{6.} 8444 S. Oketo Aven	(Street Address of Principal Office)	EEFFICE ST
Bridgeview, Illinois 6		ORIDE OR
	(Mailing Address)	D
7. The name, title or capacity and	address of the person(s) who has/have authority	y to manage is/are:
John Bowman, Manager	- 8444 S. Oketo Avenue, Bridgevie	w, Illinois 60455
Mark T. Bowman, Manage	er - 8444 S. Oketo Avenue, Bridgevi	ew, Illinois 60455
Russ Rasner, Manager -	- 8444 S. Oketo Avenue, Bridgevie	w, Illinois 60455
having custody of records in the juracceptable. If the certificate is in a must be submitted)	e of existence, no more than 90 days old, duly a risdiction under the law of which it is organized foreign language, a translation of the certificate Signature of an authorized person aution of this document constitutes an affirmation under the penalties of	. (A photocopy is not under oath of the translator

Linda D. Wainwright, organizer

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	of the Limited Liability (Company is:	
If unavailable,	the alternate to be used	in the state of Florida is:	
2. The name a	und the Florida street add	dress of the registered agent and office are:	
	NRAI Services, Inc.		
		(Name)	_
	1200 South Pine Island Re	oad	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	FL 33324	
		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.

By: Jin Baughy ast. Sec.
(Signature)

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

File Number

0496191-9



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

JRM FRESH START, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 29, 2014, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 30TH

day of

DECEMBER

A.D.

2014

Authentication #: 1436400713 verifiable until 12/30/2015. Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE