M/50000013260

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W15-7340

Office Use Only



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01/21/15--01009--019 **125.00

2015 FEB 10 AM 11: 47

FEB 1 9 2015

J. BRUCE



February 2, 2015

DANIEL BENGIO 2875 NE 191ST STREET, SUITE 601 AVENTURA, FL 33180

SUBJECT: JAN CONSULTING LLC Ref. Number: W15000007340

We have received your document for JAN CONSULTING 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 715A00002050

COVER LETTER

	Nai	me of Limited Liability Company	
		ability Company for Authorization to Transact Business in Florida," above referenced foreign limited liability company to transact business.	
Please return	n all correspondence concerning this m	natter to the following:	
	Daniel Bengio		
		Name of Person	
	Gilman Ciocia		
	**************************************	Firm/Company	
	2875 NE 191st	Street Suite 601	
		Address	
	aventura, fl 331	180 En	20
		City/State and Zip Code	
	daniel.bengio@)gtax.com	
	E-mail address	s: (to be used for future annual report notification)	0
For further is	nformation concerning this matter, ple	ase call: $\frac{1}{\omega}$	
D	aniel Bengio	305 \ 9377773	AHIII.
	Name of Contact Person	Area Code Daytime Telephone Number	
Div Reg P.O	AILING ADDRESS: vision of Corporations gistration Section b. Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	

Certified Copy

of Status & Certified Copy

Certificate of Status

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO

	ILTING LLC	omouny: must inclu	de Limited Liabilit	v Company, "L	L.C. or LLC.5		
HAI WATE	ATCHES	LLC					
(Il name unavailable, ente Liability Company," "L.D	er alteriate name adopted f	for the purpose of it	ansacting business in	r Florida. The all	ernite name must	include."Luni	ted
₂ DELAWA	···		46-498		·		
company is organized		ed liability: "	The state of the s	(FEI number.	il applicable i		:
4. <u>12/01/20</u>							•
3.7.3.7			Florida; if prior to re F.S. to determine p				• •
₅ , 20201 E	COUNTRY	Y CLUB	DR.,#1	601	· · ·		
AVENTL	JRA, FL 33	180		, ,	¥	· >:	201
6. Sound		(Sireet Address	of Principal Office)	* * * * * * * * * * * * * * * * * * * *			5 FEB
						388 XXX	0
A Commence		(Maili	ng Address)			2	<u> </u>
7. The name, title	or capacity and add	ress of the per-	ion(s) who has/	have authori	y to manage,	is/a@=	=
JOHANA:	SEVILLIA,	MGRM	ا الله الله الله الله الله الله الله ال	,		(F)	۲٦
20201 E C	COUNTRY	CLUB D	R., # 16	01			
AVENTUF	RA, FL 331	80	,			,	
8. Attached is an or having custody of	riginal certificate of records in the jurisd	existence, no i	e law of which	it is organize	d. (A`photocc	ppy is not	
acceptable. If the c	ertificate is in a forc	John Committee C	343	me certificat	e under oath c	n the trans	iator
	سين	` 1					

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.

ı.	The name	of the	Limited	Liability	Company	is

JAN CONSULTING LLC

If unavailable, the alternate to be used in the state of Florida is:

JAN WATCHES LLC

2: The name, and the Florida street address of the registered agent and office are:

JOHANA SEVILLIA

(Name)

20201 E COUNTRY CLUB DR., 1601

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

AVENTURA

33180

City/State/Zip

2015 FEB. 10 AH II:47

(Signature)

\$ 100.00.

Filing Fee for Application

S 25.00

Designation of Registered Agent

\$ 30.00

Certified Copy (optional)

\$ 5:00°

Certificate of Status (optional)

d of the plant

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JAN CONSULTING LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE ELEVENTH DAY OF FEBRUARY, A.D. 2015.

5491156 8300

150174284

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 2111280\)

DATE: 02-11-15

You may verify this certificate online at corp.delaware.qov/authver.shtml