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4PR 1 6 2015 J. HARRIS CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 513578 8036344

AUTHORIZATION : Smell ble

COST LIMIT : (\$'\125.00

ORDER DATE: February 24, 2015

ORDER TIME : 2:50 PM

ORDER NO. : 513578-002

CUSTOMER NO: 8036344

#### FOREIGN FILINGS

NAME: JORDES, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

YX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### **COVER LETTER**

SUBJE	<sub>cr:</sub> Jordes, LLC		
		ame of Limited Liability Company	
		iability Company for Authorization to Transact Business in Florida," above referenced foreign limited liability company to transact busin	
Please r	cturn all correspondence concerning this n	matter to the following:	
		Name of Person	
		Firm/Company	
		Address	
		City/State and Zip Code	
		ss: (to be used for future annual report notification)	
For furti	ner information concerning this matter, plo	nt (	
	Name of Contact Person	at () Area Code Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassec, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclos	ed is a check for the following amo  \$\Bigcup\$ \text{\$\subseteq} \	ing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Ce	

### 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. Jordes, 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 alternat Liability Company," "L.L.C," or "LJ.C.")	e name must include "Limited	
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if approximately)	olicable)	
4	70 B	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	5 APF	1 1
<sub>5.</sub> 200 South Biscayne Boulevard, Suite 1120	HAS	TEARL)
Miami, FL, US, 33131	SEE. A	71
(Street Address of Principal Office) 6. 200 SOUTH BISCAYNE BOULEVARD, STE 1120	F STAT	
MIAMI, FL 33131 (Mailing Address)		
7. The name, title or capacity and address of the person(s) who has/have authority to JORDAN DESNICK, MEMBER  200 SOUTH BISCAYNE BOULEVARD, STE 1120	manage is/are:	
MIAMI, FL 33131		
8. Attached is an original certificate of existence, no more than 90 days old, duly authorized person language. (A acceptable. If the certificate is in a foreign language, a translation of the certificate uncomust 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 perjum aware that any false information submitted in a document to the Department of State constitutes a third degree felony as pro-	A photocopy is not der oath of the translate	or
Mr. Jordan Desnick	<del></del>	
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 nam	ne of the Limited Liability Co	ompany is:	
If unavailab	ole, the alternate to be used in	the state of Florida is:	
2. The nam	e and the Florida street address	ess of the registered agent and off	
	Corporation Service Com	pany	APR CRET
		(Name)	TARY
	1201 Hays Street		AM 9:
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	: 57
	Tallahassee	32301 FI	
		City/State/Zip	
liability com registered a statutes rela	npany at the place designated gent and agree to act in this c sting to the proper and comple	and to accept service of process fo in this certificate, I hereby accept capacity. I further agree to compl ete performance of my duties, and egistered agent as provided for in	the appointment as y with the provisions of all I am familiar with and
	Corporatión Service Compo	any Signature)	Courtney Williams _Asst. Vice President
	\$ 100 \$ 25 \$ 30	.00 Filing Fee for Application	Agent

## Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "JORDES, 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 FIFTEENTH DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JORDES, LLC"
WAS FORMED ON THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5700856 8300

150511734

Jeffrey W. Bullock, Secretary of State

AUTHENTX CATION: 2291253

DATE: 04-15-15

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