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CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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ЛЈІ PC, LLC	
	-
	-
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
•	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
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	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
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Requested by: SETH 05/01/15	UCC 1 or 3 File
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Walk-In Will Pick Up	Courier

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: JLJI PC, LLC	ne of Limited Liability Company	*
The enclosed "Application by Foreign Limited Lia	bility Company for Authoriza	ation to Transact Business in Florida," Certificate of ted liability company to transact business in Florida.
Please return all correspondence concerning this ma	atter to the following:	
Marlyn J. Wiene	er, Esq.	
	Name of Person	
Marlyn J. Wiene	er, P.A.	
	Firm/Company	
6111 Broken Sc	ound Parkway	y NW, Suite 330
	Address	
Boca Raton, FL	33487	
	City/State and Zip Code	
marlyn@mwflori		
E-mail address:	(to be used for future annual rep	sort notification)
For further information concerning this matter, please	e cuii	
Marlyn Wiener	at (561	,443-7124
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 Circ Tallahassee, F1. 32301	cle
Enclosed is a check for the following amoun	Fee & \$155.00 Filing	

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

IN COMPILANCE WITH SECTION 605,0902, FLORIDA S FOREIGN LIMITED LIABILITY COMPANY TO TRANSAC		
, JLJI PC, LLC		
(Name of Foreign Limited Liability Company, must inc	clude "Limited Liability Company," "L.L	.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of Liability Company," "L.L.C," or "Lf.C.")		rinte name musi include "Lunited
, Delaware	_{3.} 47-3706475	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if	applicable)
4.		50 d
(Date first transacted business in (See sections 605.0904 & 605.090)	n Florida, if prior to registration.) 5, F.S. to determine penalty liability)	
_{5.} 6103 Agua Avenue, #806		
Miami Beach, FL 33141		P
6103 Aqua Avenue, #806	es of Principal Office)	2:20
Miami Beach, Fl 33141		
	ing Address)	
7. The name, title or capacity and address of the per-	son(s) who has/have authority	to manage is/are:
Jeff Morr, Manager	•	J
6103 Aqua Avenu	e #906	
Miani Beach, F/3	3141	
8. Attached is an original certificate of existence, no rhaving custody of records in the jurisdiction under the acceptable. If the certificate is in a foreign language, a must be submitted)	e law of which it is organized.	(A photocopy is not
Signature of at Signature of at accordance with section 605,0203, F.S., the execution of this document consum aware that any false information submitted in a document to the Department	n authorized person sutures on affirmation under the penalties of p t of State constitutes a third degree felony as p	erjury that the facts stated herein are true keyided for in a.817 155, F.S.)
Jeff Morr		
Typed or printed	I 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 Con- JLJI PC, LLC	spany is:	ST ST WY
If unavailable, the alternate to be used in the	he state of Florida is:	
2. The name and the Florida street address	s of the registered agent and office are:	A 12: 20
Jeff Morr		7
	(Name)	
6103 Aqua Av	enue, #806	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		_
Mlami Beach	_{FL} 33141	
	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 statues 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)

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

Delaware

PAGE :

The First State

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

DELAWARE, DO HEREBY CERTIFY "JLJI PC, 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 TWENTY-NINTH DAY OF APRIL, A.D. 2015.

5725617 8300

150581602

AUTHENTICATION: 2331489

DATE: 04-29-15

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