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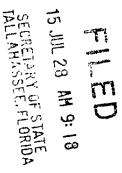
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COVER LETTER

| TO: | Registration Section Division of Corporations | |
|----------|--|--|
| SUBJE | ECT: TJF USA, LLC | |
| | Name of Limited Liability Company | |
| | closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," nce, and check are submitted to register the above referenced foreign limited liability company to transact busin | |
| Please | return all correspondence concerning this matter to the following: | |
| | ROBERT P. SALTSMAN | |
| | Name of Person | |
| | ROBERT P. SALTSMAN, P.A. | |
| | Firm/Company | |
| | 222 S. Pennsylvania Ave., Winter Park, FL | |
| | Address | |
| | WINTER PARK, FL 32789 | |
| | City/State and Zip Code | |
| | nancy@saltsmanpa.com | |
| | E-mail address: (to be used for thiure annual report notification) | |
| For furt | her information concerning this matter, please call: | |
| | Nancy J. Calhoun at (407) 647-2899 Name of Contact Person Area Code Daytime Telephone Number | |
| | Name of Contact Person Area Code Daytime Telephone Number | |
| | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Control of Corporations Registration Section Clifton Building Control of Corporations Registration Section Clifton Building Tallahassee, FL 32301 | |
| Enclos | ted is a check for the following amount: \$\Boxed{\text{S130.00 Filing Fee}} \Boxed{\text{S130.00 Filing Fee}} \Boxed{\text{S155.00 Filing Fee}} \Boxed{\text{S160.00 Filing Fee}} \Boxed{\text{Certified Copy}} \Boxed{\text{of Status}} \Boxed{\text{Certified Copy}} \Boxed{\text{of Status & Certified Copy}} \Boxed{\text{S160.00 Filing Fee}} \Boxed{\text{Certified Copy}} \text{Certifi | |

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. TJF USA, LLC | eign Limited Liability Company; must include "Limi | ted Liability Company " "L. L. C. " or | · '' [(' '') |
|--|---|---|---|
| (Name of Port | eigh Limited Liability Company, must include Limit | led Liability Company, L.L.C., of | LEC.) |
| Liability Company," "L.L.C, | Iternate name adopted for the purpose of transacting or "LLC.") | business in Florida. The alternate nat | me must include "Limited |
| 2. DELAWARE | 3. 59-374 | | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI number, if applicable | .) |
| 4. August 28, 2001 (L010 | | | |
| | (Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to do | prior to registration.) termine penalty liability) | |
| 5. 9439 FOREST CITY I | RD, SUITE 1000 | | |
| ALTAMONTE SPRIN | | | - FS 5 |
| 0440 POBROW OUTL | (Street Address of Principal Office) | | FG & Th |
| 6. 9439 FOREST CITY R | D, SUITE 1000 | | 2 |
| ALTAMONTE SPRIN | IGS, FL 32714 | | (N) (D) |
| | (Mailing Address) | | 一 |
| 7. Name and street addres | s of Florida registered agent: (P.O. Box NOT | acceptable) | A 9: 18 YOF STATE |
| Name: | DIANE FRANKLIN | | REFE TO |
| Office Address: | 9439 FOREST CITY RD, SUITE 1000 | | V |
| | ALTAMONTE SPRINGS, | , Florida 32714 | _ |
| _ | (City) | (Zip code) | |
| this application, I hereby | gistered agent and to accept service of process accept the appointment as registered agent and statutes relative to the proper and complete per | d agree to act in this capacity. I | further agree to comply |
| | (Registered agent's sign | nature) | _ |
| 8. The name, title or capa TJF MANAGEMENT CO | ocity and address of the person(s) who has/have | authority to manage is/are: | |
| 9439 FOREST CITY RD, | • | | |
| ALTAMONTE SPRINGS | s, FL 32714 | | |
| 9. Attached is a certificate jurisdiction under the law of the translator must be su | of existence, no more than 90 days old, duly autof which it is organized. (If the certificate is in a abmitted) Signature of an authorized | foreign language, a translation o | custody of records in the of the certificate under oath |

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

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: | |
|--|---|---|
| TJF USA, LLC | | |
| If unavailable | , the alternate to be used in the state of Florida is: | |
| 2. The name | and the Florida street address of the registered age | ent and office are: |
| | DIANE FRANKLIN | |
| | (Name) | |
| | 9439 FOREST CITY ROAD, STE 1000 | |
| | Florida Street Address (P.O. Box NOT AC | CCEPTABLE) |
| | ALTAMONTE SPRINGS FL 32714 City/State/Zip | |
| liability compo registered age statutes relati | named as registered agent and to accept service of pany at the place designated in this certificate, I here nt and agree to act in this capacity. I further agree by to the proper and complete performance of my digations of my position as registered agent as provi | eby accept the appointment as to comply with the provisions of all luties, and I am familiar with and |
| | Diane Franklin By: | and the |
| | (Signature) | FALL J |
| | \$ 100.00 Filing Fee for Ap \$ 25.00 Designation of R \$ 30.00 Certified Copy (c \$ 5.00 Certificate of Sta | egistered Agent SEG T |

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "TJF USA, 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-SEVENTH DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TJF USA, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF JULY, A.D. 2015.

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

5791398 8300

151098089

AUTHENTY CATION: 2592189

DATE: 07-27-15

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