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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 26 2015

T. HAMPTON

18875-5107

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CJS Technology Select Management LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Carl J. Smith

Name of Person

CJS Technology Select Fund LLC

Firm/Company

2409 N. University Dr.

Address

Coral Springs, FL 33065

City/State and Zip Code

csmith@cjsfinancial.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carl J. Smith

954

825-0309

at ()

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 Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 AUG 25 PM 2: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 12, 2015

CARL J SMITH
2409 N UNIVERSITY DR
CORAL SPRINGS, FL 33065

SUBJECT: CJS TECHNOLOGY SELECT MANAGEMENT LLC
Ref. Number: W15000054284

We have received your document for CJS TECHNOLOGY SELECT MANAGEMENT LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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.

Tammy Hampton
Regulatory Specialist III

Letter Number: 315A00017032

**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. CJS Technology Select Management LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

CJS Tech Management LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. State of Delaware 3. 47-4658729
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Sept. 1, 2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2409 N. University Dr.
Coral Springs, FL 33065
(Street Address of Principal Office)

6. _____
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Steven Baldassarra

Office Address: 2409 N. University Dr.
Coral Springs, , Florida 33065
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)


8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Carl J. Smith President 2409 N. University Dr. Coral Springs, FL 33065

Joseph Baldassarra Co- President/Secretary 2409 N. University Dr. Coral Springs, FL 33065

Steven Baldassarra Co-President/Treasurer 2409 N. University Dr. Coral Springs, FL 33065

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)


Signature of an authorized person

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.

Carl J. Smith

Typed or printed name of signer

FILED
15 AUG 25 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CJS TECHNOLOGY SELECT MANAGEMENT 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 TWENTIETH DAY OF AUGUST, A.D. 2015.

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

5793035 8300

151195357

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2661837

DATE: 08-20-15