M588008384

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		i

Office Use Only



100278101411

10/15/15--01016--011 **160.00

SECRETARY OF STATE LLAHASSEE, FLORIDA

O.BRUCE

COVER LETTER

JA SIDING SVC LLC

TO: Registration Section
Division of Corporations

SUBJECT:

	Name of	Limite	d Liability C	Company				
The enclosed "Application by Fore Existence, and check are submitted								
Please return all correspondence co	oncerning this matter to the	follov	ving:					
	JOSE A	OSO	RIO					
	N	ame o	f Person					
	JA SIDIN	IG SV	C LLC					
	Fi	irm/Co	ompany				-	
	711 SUTC	НМА	N RD					
		Add	ress				_	
	GRIFFIN,	GA 3	0223					
	City/S	tate ar	nd Zip Code				-	
	osorio.polo							
	E-mail address: (to be used	I for f	iture annual	report not	ification)	TALI SE	2015	
For further information concerning	this matter, please call:						2015 OCT	77
JOSE A OS	SORIO	at (4()4)	304-9352	ASSE ASSE	25	
Name of	Contact Person		Area Code	Day	time Telephone	Njimber	 >	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314				Division Registrati Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding ceutive Center Ci ice, FL 32301	STATE LORIDA	A II: 18	Ö
Enclosed is a check for the followin ■ \$125.00 Filing Fee	ng amount: □ \$130.00 Filing Fee & Certificate of Status		155.00 Filin tified Copy	g Fee &	□ \$160.00 File of Status & Ce			ate

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

	ON 605.0902, FLORIDA STATUTEN, THE INESS IN THE STATE OF FLORIDA:	EPOLLOWING ISS	SUBMITHED TO RECAD	SIBRAFOREIC	IN TIMHHADI IABILITY
1.	JA SIDING SVC LLC				
(Name of Foreig	n Limited Liability Company; must inc	lude "Limited Liab	oility Company," "L.L	.C.," or "LLC.")
Liability Company," "L.L.C," o		-	s in Florida. The alterr	nate name must	include "Limited
2. GEORGIA	which foreign limited liability	3. <u>47-3879026</u>	(FEI number, if app	.ee.v	
company is organized)			(rr.i number, ii app	meaore)	
4.	October 15,2015		·		
	(Date first transacted business in (See sections 605.0904 & 605.0905	Fisher to determine	registration.) penalty liability)		
5					
	711 SUTCHMAN RD GRIFF	IN, GA 30223			
· · · · · · · · · · · · · · · · · · ·	(Street Address of Princi	pal Office)			
6		· · · · · · · · · · · · · · · · · · ·			
	osorio.polo96@gmail.com			4	
<u> </u>	(Mailing Addre	ess)		PE(2 2
7. Name and street address	of Florida registered agent: (P.O. B	ox <u>NOT</u> accepta	able)	CRET	3
Name:	JOSE A OSORIO		_	SSA -	- 1
Office Address:	1705 13TH ST W		_	SECTION A	
	BRADENTON, FLORIDA		, Florida <u>34205</u>	A II. II. II. II. II. III. III. III. II	
Registered agent's accepta	(City)		(Zip co		-
designated in this application to complywith the provision	stered agent and to accept service of on, I hereby accept the appointment is of all statutes relative to the proper position as registered agent.	t as registered ag er and complete	gent and agree to ac	et in this capac duties, and I	city. I further agree
•	(Registered a	agent s signature)			
·	ty and address of the person(s) who				
JOSE A OSORIO OWI	NER ,711 SUTCHMAN RD G	RIFFIN, GA 302	223		
					-
	existence, no more than 90 days of which it is organized. (If the certific mitted)				
•	Signature of an				
	Signature of an	authorized person			
	n accordance with section 605.0203 one Department of State constitutes a JOSE A OS	third degree felo			

Typed or printed name of signee

Control Number: 15043392

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

JA SIDING SVC LLC

· a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact husiness in Georgia on the below date. Said entity is in compliance with the applicable fiting and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Dacket Number Date InciAuth/fuled Juri eliction Print Date

104/30/2015 : Georgia Form Number

.12179683

1151



Secretary of State