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## COVER LETTER

TO:		tion Section of Corporation	s		•		
SUBJE		E HOLDINGS,					
		Name of Limited Liability Company					
			eign Limited Liability Comp I to register the above refere				
Please r	eturn all c	orrespondence c	oncerning this matter to the	following:			
		TINA M. MYE	RS				
Name of Person							
JTRE HOLDINGS, LLC							
Firm/Company 9129 MID PINES CT							
				Address			
	ORLANDO, FL 32819						
		City/State and Zip Code					
JASONCMYERS73@GMAIL.COM						2016 FE	H :
	E-mail address: (to be used for future annual report notification)						A STANSON
For furt	her inform	ation concerning	g this matter, please call:				
	TINA M	. MYERS		407 at (	5758534	5 6	
		Name o	f Contact Person	Area Code	Daytime Telepho	one Number 🔾	
	Division Registrat P.O. Box	IG ADDRESS: of Corporations ion Section : 6327 see, FL 32314			STREET ADDRESS Division of Corporate Registration Section Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle	
Enclose	d is a chec	k for the followi 00 Filing Fee	ing amount:  \$\Bigsim \\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filin Certified Copy		Filing Fee, Certificate Certified Copy	

## 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: JTRE HOLDINGS, 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 alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 9129 MID PINES CT., ORLANDO, FL 32819 (Street Address of Principal Office) 9129 MID PINES CT., ORLANDO, FL 32819 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) TINA M. MYERS Name: 9129 MID PINES CT. Office Address: **ORLANDO** (City) Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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: TINA M. MYERS JASON C. MYERS 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

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

TINA M. MYERS

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information

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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "JTRE HOLDINGS, 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 FEBRUARY, A.D. 2016.

at corp delaware gov/aut

Authentication: 201830138

Date: 02-15-16