MILOCOCOALHO

(Req	uestor's Name)	
(Address)		
(Address)		
(City	/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MÁIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
%		
(1400) 11110		
01114		
W16-219	198	

Office Use Only



600283654626

03/23/16--01022--003 **125.00

ZOIS HAR ZOI P 3: 35

MAR 3 0 2016

S MASON



Division of Corporations

March 25, 2016

SCOTT O'ROURKE 5 PINE GROVE COURT OLD TAPPAN, NJ 07675

SUBJECT: JAY STREET VENTURES, LLC

Ref. Number: W16000021998

We have received your document for JAY STREET VENTURES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with 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.

Dionne M Scott Regulatory Specialist II

Letter Number: 116A00006062

COVER LETTER

TO:

Registration Section

Div	ision of Corporations		
SUBJECT:	JAY STREET VENTURES, LLC Name of Limited Liability Company		
000000			
		ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florida.	
Please return	all correspondence concerning this matter to	the following:	
	Scott O'Rourke		
	Name of Person		
	Firm/Company		
	5 Pine Grove Court		
	Address		
	Old Tappan, NJ 07675		
,		y/State and Zip Code (
	E-mail address: (to be t	used for future annual report notification)	
For further in	aformation concerning this matter, please call:		
Sec	ott ()'Rourke	at (914) 403-8328 Area Code Daytime Telephone Number	
	Name of Contact Person	Area Code Daytime Telephone Number	
Div Reg P.O	ALING ADDRESS: ision of Corporations gistration Section Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	a check for the following amount: \$125.00 Filing Fee	& □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy	

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

EN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. HIMTED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA: Jay Street Ventures, 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.") 2. New Jersey (Inrisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date lirst transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5 Pine Grove Court (Street Address of Principal Office) Old Tappan, NJ 07675 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Don: 'Wenner Home Selling, Inc. Name: 454 S Yonge Street Office Address: Ormond Beach (City) Registered agent's acceptance: Having been named as registered ugent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appaintment 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 registored 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: Scott O'Rourke 5 Pine Grove Court Old Tappan, NJ 07675

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.

Scott O'Rourke

Typed or printed name of signee

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

JAY STREET VENTURES LLC 0400457169

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on December 09, 2011.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2015

I further certify that the registered agent and office are:

SCOTT O'ROURKE 26 JAY STREET SUITE 200 NORWOOD, NJ 07648



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 29th day of March, 2016

Ford M. Scudder Acting State Treasurer

Certificate Number: 6070532053

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp