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(Red	questor's Name)			
(Add	dress)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
cuo W16-	20194			

Office Use Only



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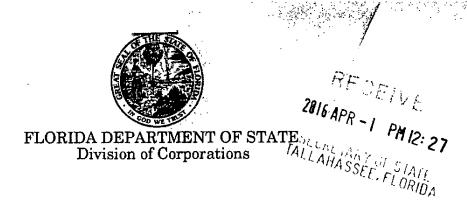
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March 17, 2016

JENNIFER HARGADEN
JH MARKETING SOLUTIONS LLC
P.O. BOX 718
NARBERTH, PA 19072

SUBJECT: JH MARKETING SOLUTIONS LLC

Ref. Number: W16000020194

We have received your document for JH MARKETING SOLUTIONS LLC and your check(s) totaling \$130.00. 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.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 816A00005570

#### **COVER LETTER**

	ion Section of Corporation	s		
SUBJECT:	JH M	arketing Sol Name of	WHOUS LLC Limited Liability Company	
The enclosed "App Existence, and chee	olication by For ck are submitte	eign Limited Liability Con d to register the above refe	npany for Authorization to Tra renced foreign limited liability	unsact Business in Florida," Certificate of y company to transact business in Florida
Please return all co	rrespondence c	oncerning this matter to the	e following:	
-		Jenn	ifer Hargadev	1
		JH Mark	warne of Person  Other Solutions	LLC
Firm/Company				
P.O. Box 718				
			Address	
Narbertn, PA 19072				
City/State and Zip Code  Jennifer and Harketing Solutions. Com  E-mail address: (to be used for future annual report notification)				
75		·	eu foi futtife annual report not	in Catton)
	•	g this matter, please call:		2.0
<u> </u>	enniter	Hargaden	at ( <u>941</u> ) <u>(18</u>	15-3488
	Name o	f Contact Person	Area Code Day	time Telephone Number
Division ( Registrati P.O. Box	G ADDRESS: of Corporations on Section 6327 ee, FL 32314		Division Registrat Clifton E 2661 Exc	r ADDRESS: of Corporations ion Section Building ecutive Center Circle see, FL 32301
Enclosed is a chec 1 \$125.0	k for the follow 10 Filing Fee	ing amount:  12 \$130.00 Filing Fee &  Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

### APPEICATION 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: ONAME OF FOREIGN LIMITED COMPANY; MUST INClude "Limited Liability Company," "L.L.C.," or "LLC.") Marketing Consulting 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.") <u>Pennsylvania</u> FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability 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) 200 S. Narberth Ave, Apt A (Street Address of Principal Office) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 2103 Manatee Ave. W Office Address: 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 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) KHWAJM 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.

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

IN COMPILANCE WITH SECTION 606.0902, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FL COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	OREIGN LIMITED LIABILITY
1. JH Marketing Solutions LLC (Name of Foreign Limited Lability Company; must include "Lamited Liability Company," "LLC." or "!	(1 ( · · · )
JH Markering Consulting LLC	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name Linbility Company," "LLC," or "LLC.")	must include "Limited
2. Pernsulvania 2 91-1547435	
company is organized)	
4 N/A	72
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	3 8 m
5. 200 S. Narberth Ave, Apt A	
Navberth, PA 19072 (Street Address of Principal Office)	2016 APR -1 PH 3: 29
6. P. O. Box 710	P P
Narbern, PA 19072	E. C.
(Mailing Address)	29
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: David Moitgomery, Esq.	
Office Address: 2103 Manatec Aul. W	
BIGGENTON, FL , Florida 34205 (Zip code)	•
<del>-</del> -	•
Register ed agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated limited liabil	ity company at the place
designated in this application, I hereby accept the appointment as registered agent and agree to act in this	s capacity. I further agree
to complywith the provisions of all statutes relative to the proper and complete performance of my duties, accept the obligations of my position as registered agent.	, and I am lamiliar with and
Constant Stone Co	
(Registered agent's negative)	-
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Jenniter Hargaken, Director	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate is in a foreign language.	f the certificate under oath
of the translator must be submitted)	
Hurtagalen	
Signature of an authorized person	<b>-</b>
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that an	ry false information
submitted in a document to the Department of State constitutes a third degree felony as provided for in s.81	7.155, F.S.
/ faultaignen	
Turbo or oriefted name of riman	

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

03/28/2016



#### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

JH Marketing Solutions LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC160328131302-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx