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COVER LETTER

TO:	Registration Section Division of Corporation	ns			
SUBJE	JM & MM Propert	ies, LLC			
3000		Name of	Limited Liability	Company	
					nnsact Business in Florida," Certificate of y company to transact business in Florida
Please r	eturn all correspondence	concerning this matter to the	following:		
			ame of Person		
		Re/max A	irm/Company	s R	cul Estate
		10055 OV	Address	17:g	hway
	<u></u>	Marathon City/s	tate and Zip Code	330	50
		E-mail address: (to be used	tyouy (Teport not	Mail.Com
For furth	er information concernin	g this matter, please call:	•		
	James Name o	Mulkin	at (& O d	34°	3-8637 time Telephone Number
	MALLING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registration But Clifton But 2661 Exec	ADDRESS: of Corporations on Section milding cutive Center Circle ce, FL 32301
	is a check for the follow ☐ \$125.00 Filing Fee	ing amount: \$\Pi\$ \\$130.00 \text{Filing Fee & Certificate of Status}	□ \$155.00 Filin Certified Copy	g Fee &	\$160.00 Filing Fee, Certificate of Status & 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Af nome unavailable, enter a					
Liability Company," "L.L.C	alternate name adopted for the purpose of transacting business in Florida "," or "LLC.")	. The alternate name	must incl	ude "Li	nited
2. Vermont	3. 26-4689793				
(Jurisdiction under the lay company is organized)	v of which foreign limited liability (FEI num	mber, if applicable)			
4	(Date first transacted business in Florida, if prior to registration	n.)			
5. 3693 US Route 5	(See sections 605.0904 & 605.0905, F.S. to determine penalty lia				
Derby, VT 05829			필요	alan On	
6. P.O. Box 729	(Street Address of Principal Office)		by 1	70	Services of the services of th
Derby, VT 05829					e se
	(Mailing Address)		*10.1 10.1 71	Ξ	i Fili
7. Name and street addre	ss of Florida registered agent: (P.O. Box NOT acceptable)		100 127	<u>iż</u>	- manager
Name:	Guy Moreau		:22 :21 :21	J	
Office Address:	10055 Overseas Highway		y-0*		
	Marathon , Florida (City)	33050 (Zip code)	`{-0*		
Registered agent's accep laving been named as re lesignated in this applice o complywith the provisi	Marathon , Florida (City)	(Zip code) ated limited liabili gree to act in this	capacity.	. I furt	her agre
Registered agent's acceptaving been named as reflexing been named as reflexionated in this application comply with the provision of the obligations of the anne, title or cap	Marathon (City) Itauce: egistered agent and to accept service of process for the above station, I hereby accept the appointment as registered agent and a sions of all statutes relative to the proper and complete performancy position as registered agent.	(Zip code) ated limited liabili gree to act in this nce of my duties,	capacity.	. I furt	her agre
Registered agent's acceptaving been named as relessing ated in this applicate occupy with the provising accept the obligations of the acceptate when the provisions of the acceptate with the provisions of the acceptate with the provisions of the acceptate with the acceptance of the acceptance with the acceptance with the acceptance of the acceptance with the acceptance of the acceptance o	Marathon (City) Diauce: egistered agent and to accept service of process for the above station, I hereby accept the appointment as registered agent and a ions of all statutes relative to the proper and complete performance my position as registered agent. (Registered agent's signature) acity and address of the person(s) who has/have authority to managent.	(Zip code) ated limited liabili gree to act in this nce of my duties,	capacity.	. I furt	her agre
Registered agent's acceptaving been named as relessing to this application of a complywith the provision of the obligations of the anne, title or captames W. Mulkin, Member Mary Ann Mulkin, Member Attached is a certificate	Marathon (City) Diance: Legistered agent and to accept service of process for the above station, I hereby accept the appointment as registered agent and a sions of all statutes relative to the proper and complete performancy position as registered agent. (Registered agent's signature) acity and address of the person(s) who has/have authority to manater, P.O. Box 729 Derby, VT 05829 ber, P.O. Box 729 Derby, VT 05829 of existence, no more than 90 days old, duly authenticated by the of which it is organized. (If the certificate is in a foreign language	(Zip code) ated limited liabili gree to act in this nce of my duties, age is/are:	capacity, and I am	. I furt famili	her agrear with a

STATE OF VERMONT OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

JM & MM PROPERTIES, LLC

a Domestic Limited Liability Company formed under the laws of the State of VERMONT, was filed for record in this office on Dec 11, 2007.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

March 31, 2016

Given under my hand and the seal of the State of Vermont, at Montpeller, the State Capital.

TREEDOM TO THE TOTAL PROPERTY OF THE PROPERTY

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James C. Condos Vermont Secretary of State

Business ID: 0002128

Certificate Number: 2013252037001