M4000004494

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600286043326

05/23/16--01032--024 **125.00

2016 HAY 23 P 2: 1. SECRETARY OF STATE SECRETARY OF STATE

> UUH O'G 'RMS').BRUCE

COVER LETTER

	ion of Corporations			
SUBJECT:	CMA, LLC, Series 4			
Jebuber	Name o	of Limited Liability C	Company	-
	Application by Foreign Limited Liability Co check are submitted to register the above ref			
	all correspondence concerning this matter to t	-	J 1 J	
	Mary Daviglus			
		Name of Person		-
	JCMA, LLC			
		Firm/Company		-
	1406 Granville Lane			
		Address	· · ·	-
	Orlando, FL 32803			
	City	/State and Zip Code		-
	mldaviglus0919@yahoo.com			
•	E-mail address: (to be u	sed for future annual	report notification)	-
For further info	ormation concerning this matter, please call:			
Mary	Daviglus	407 at (697-1881	
	Name of Contact Person	Area Code	Daytime Telephone Number	•
Divis Regis P.O. 1	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	check for the following amount: 25.00 Filing Fee \$\precests \$130.00 Filing Fee &\precests Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee & \$160.00 Filing Fee Coof Status & Certified Co	Perfecte ppy MAY 23

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:

			ide "Limited Liab	ility Company," "L.L.C.,	or "LLC.")
f name unavailable, enter al	Iternate name adopted for the purp	ose of tra	ansacting business	in Florida. The alternate	name must include "Limited
ability Company," "L.L.C,"	" or "LLC.")				
Delaware		3.	01-0888798		
(Jurisdiction under the law company is organized)	of which foreign limited liability			(FEI number, if applica	ble)
as of registration					
	(Date first transacted busi (See sections 605.0904 & 60	ness in F 05.0905,	lorida, if prior to F.S. to determine	registration.) penalty liability)	
1406 Granville Lane					
Orlando, FL 32803					
	(Street Address of	f Princip	oal Office)		
1406 Granville Lane					
Orlando, FL 32803					
	(Mailin	g Addres	ss)		
Name and street addres	ss of Florida registered agent:	(P.O. Bo	ox <u>NOT</u> accepta	ible)	
Name:	Mary Daviglus			-	
Office Address:	1406 Granville Lane			-	
	Orlando			Florida 32803	
	(City)			(Zip code))
		ervice o	f process for the	above stated limited l	iability company at the plac
laving been named as re esignated in this applica o complywith the provisi ccept the obligations of i	egistered agent and to accept so tion, I hereby accept the appo ions of all statutes relative to the my position as registered agen (Reg	intment he prope it. Cycy fisteyed	as registered ager and complete	gent and agree to act is performance of my di	n this capacity. I further ag
laving been named as re esignated in this applica o complywith the provision ccept the obligations of the B. The name, title or cap	egistered agent and to accept s ution, I hereby accept the appo ions of all statutes relative to the	intment he prope it. Cycy fisteyed	as registered ager and complete	gent and agree to act is performance of my di	n this capacity. I further ag
laving been named as reesignated in this applicate complywith the provision comply with the provision of the control of the co	egistered agent and to accept so tion, I hereby accept the appo ions of all statutes relative to the my position as registered agen (Reg	intment he prope it. Cycy fisteyed	as registered ager and complete	gent and agree to act is performance of my di	n this capacity. I further against the same and I am familiar with
laving been named as re esignated in this applica o complywith the provision ccept the obligations of the B. The name, title or cap	egistered agent and to accept so tion, I hereby accept the appo ions of all statutes relative to the my position as registered agen (Reg	intment he prope it. Cycy fisteyed	as registered ager and complete	gent and agree to act is performance of my di	n this capacity. I further ag
laving been named as re esignated in this applica o complywith the provision ccept the obligations of the B. The name, title or cap	egistered agent and to accept so tion, I hereby accept the appo ions of all statutes relative to the my position as registered agen (Reg	intment he prope it. Cycy fisteyed	as registered ager and complete	gent and agree to act is performance of my di	n this capacity. I further against the same and I am familiar with
esignated in this applicate complywith the provision complywith the provisions of the complete complete complete the obligations of the complete co	egistered agent and to accept solution, I hereby accept the appool fons of all statutes relative to the my position as registered agent (Registered address of the person acity and address of the person acity and address of the person of which it is organized. (If the submitted)	intment the prope t. (s) who days old e certific	gent's signature) has/have author d, duly authenticate is in a foreign	gent and agree to act in performance of my during the desired at t	in this capacity. I further against and I am familiar with
Aving been named as reesignated in this applicate complywith the provision country the obligations of the country the obligations of the country Daviglus Mary Daviglus Attached is a certificate prisdiction under the law	egistered agent and to accept solution, I hereby accept the appool fons of all statutes relative to the my position as registered agent (Registered address of the person acity and address of the person acity and address of the person of which it is organized. (If the submitted)	intment the prope t. (s) who days old e certific	gent's signature) has/have author d, duly authenticate is in a foreign	gent and agree to act in performance of my during the desired at t	in this capacity. I further against and I am familiar with
Javing been named as reesignated in this applicate complywith the provision of the obligations of the obligation of the obligation of the obligation of the obligation obligati	egistered agent and to accept solution, I hereby accept the appool fons of all statutes relative to the my position as registered agent (Registered address of the person acity and address of the person acity and address of the person of which it is organized. (If the submitted)	intment the prope t. (s) who days old e certific	gent's signature) has/have author d, duly authenticate is in a foreign	gent and agree to act in performance of my during the second of the performance of my during the second of the sec	in this capacity. I further against and I am familiar with the same of the certificate under on the certificate

Typed or printed name of signee

Page 1

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "JCMA, 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 SEVENTEENTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "JCMA, LLC"

IS A SERIES LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

8300E 3324265

Authentication: 202333755

Date: 05-17-16

4195135 8300E SR# 20163324265

You may verify this certificate online at corp.delaware.gov/authver.shtml

☑ 002/003 ☑ 1112/002

State of Delaware Secretary of State Division of Corporations Delivered 01:47 PM 07/25/2006 FILED 01:44 PM 07/25/2006 SRV 060699220 - 4195135 FILE

State of Delaware Limited Liability Company Certificate of Formation

This certificate of formation is being executed for the purpose of forming a limited liability company pursuant to the Delaware Limited Liability Company Act, 6 <u>Del C</u> 18-101, et Seq.

FIRST: The name of the limited liability company is:

JCMA, LLC.

SECOND: The address of its registered office in the State of Delaware is 113 Barksdale Professional Center in the City of Newark, County of New Castle. Zip Code, 19711. The name of its Registered Agent at such address is Delaware Intercorp, Inc.

THIRD: The members agree to be bound by the signed Limited Liability Company Agreement(s) except as they may be contradicted by the Limited Liability Company Act of the State of Delaware.

FOURTH: This Certificate of Formation establishes one hundred (100) separate Series of this Limited Liability Company. Said Series may be referred to as: JCMA, LLC, SERIES 1; JCMA, LLC, SERIES 2; etc., or any other method that reasonably describes the particular Series relevant to the intended transaction.

Take Notice of the limitation on liabilities of a series as referenced in this Certificate of Formation and as set forth in 6 Del.C. 18-215. The debts, liabilities and obligations incurred, contracted for or otherwise existing with respect to a particular series shall be enforceable against the assets of such series only, and not against the assets of the limited liability company generally or any other series thereof, and, unless otherwise provided in the limited liability company agreement, none of the debts, liabilities, obligations and expenses incurred, contracted for or otherwise existing with respect to the limited liability company generally or any other series thereof shall be enforceable against the assets of such series.

FIFTH: No member or members of the limited liability company shall have the right to assign their interest in the limited liability company, whether voluntarily or involuntarily, without the unanimous written agreement of all of the members (the "Required Unanimous Vote"), unless otherwise provided in the limited liability company's operating agreement. If an assignment of a membership interest is not approved by the Required Unanimous Vote, the assignee (which includes, without limitation, the holder of a charging order) shall have no right to (I) become a member of the limited liability company, (ii) participate in the management of the limited liability company, or (iii) exercise any rights or powers of a member and/or manager. The assignee shall merely be entitled to receive the share of profits and other distributions to which the assignor was entitled, to the extent assigned. Any such assignee shall be allocated and report all items of income, gain, loss, deduction, credit or other tax allocation (a "Taxable Item") on such assignee's income tax returns each year to the same extent the assignor would have been allocated such Taxable Items and the assignee shall receive the federal and all relevant state Forms K-1 with respect to such allocations. Each Member (and any future assignee(s), including, without limitation, the holder of a charging order) is put on notice that (I) the Managers may make investment decisions that may produce significant income tax liability to the Members and assignees and that corresponding distributions with which to pay such income tax liability may not be made and (li) that the terms of the operating agreement provide that (a) this is reasonable, and (b) does not constitute a breach of fiduciary duty by the Managers.

IN WITNESS WHEREOF, I, Russell P. Rozanski, Secretary, being fully authorized to execute and file this document, for the purpose of forming a limited liability company pursuant to the Delaware Limited Liability Company Act, do make this Certificate of Formation, acknowledging under the penalties of perjury in the third degree, hereby declaring and certifying that this instrument is my act and deed and the facts herein are true, pursuant to 6 Del.C '18-204 and accordingly have hereunto set my hand this 25" day of July, 2006.

DELAWARE INTERCORP. INC.

Russell P. Rozanski, Şepretary

MAY 23 P 2