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SECRETARY OF STATE
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JUHOT MIS) BRUCE

COVER LETTER

TO:

Registration Section Division of Corporations

SURJECT:	SUBJECT:					
		pany for Authorization to Transact Business in Florida," enced foreign limited liability company to transact busine				
Please return all corre	spondence concerning this matter to the	following:				
	CHRIS	STIAN KIRBY				
	Name of Person					
JOPLIN CAPITAL GROUP, LLC						
Firm/Company						
5285 86TH AVENUE N						
Address						
PINELLAS PARK FL 33782						
-	City/S	tate and Zip Code				
kirby	christy@gmail.com	•				
	E-mail address: (to be use	d for future annual report notification)				
For further information	concerning this matter, please call:	 1				
CHRISTIAN	KIRBY	941 322 4716	manczowy			
	Name of Contact Person	Area Code Daytime Telephone Number:	Ginerage services			
MAILING A Division of C Registration S P.O. Box 632 Tallahassee,	orporations Section 7	Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check fo	r the following amount: lling Fee \$\square\$ \$\\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Ce Certified Copy of Status & Certified Cop				

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:

1	JOPLIN CAPITAL GROUI	P, LLC	
(Name of Fore	ign Limited Liability Company; must include	"Limited Liability Company," "L.L.C	," or "LLC.")
Liability Company," "L.L.C,"	ternate name adopted for the purpose of trans	sacting business in Florida. The alternat	te name must include "Limited
2. NEVADA	of which foreign limited liability	(FEI number, if appli	cable)
company is organized)	or which toleigh mines habitily	(* 2. namovi, ·· appii	· · · · · · · · · · · · · · · · · · ·
4	(Date first transacted business in Flo	rida, if prior to registration.)	
aaco invavi do	(See sections 605.0904 & 605.0905, F.	S. to determine penalty liability)	
5. 7750 IRVIN RD			
MYAKKA CITY FL 3		_	_
	(Street Address of Principal	Office)	<u>.</u>
6. 7750 IRVIN RD			
MYAKKA CITY FL 3	4251		
	(Mailing Address)		
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	TALEGRAPH THE TALE
Name:	CHRISTIAN KIRBY		33 J. L
Office Address:	5285 86TH AVENUE N		me o Fin
Office Address.	PINELLAS PARK	, Florida 33782	FLG
	(City)	, Florida(Zip cod	(e) ====================================
Registered agent's accep	tance: gistered agent and to accept service of p	process for the above stated cornor	ration at the place designated in
this application, I hereby	accept the appointment as registered ag	ent and agree to act in this capaci	ty. I further agree to comply
with the provisions of all the obligations of my posi	statutes relative to the proper and completion as registered agent	lete performance of my duties, and	l I am familiar with and accept
the voligations of my post	47	, <i>1</i>	
	Mustian Kr./	Un	
	(Kegistered age	proprignature)	
8. The name, title or capa	acity and address of the person(s) who ha	s/have authority to manage is/are:	
CHRISTIAN KIRBY, M.	ANAGER 5285 86TH AVE N PINEL	LAS PARK FL 33782	
	of existence, no more than 90 days old, of which it is organized. (If the certificate abmitted) Signature of an au	e is in a foreign language, a translat	
		_	
	I in accordance with section 605.0203 (1) the Department of State constitutes a thi		
	CHRISTIAN K	IRBY	

Typed or printed name of signee



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **JOPLIN CAPITAL GROUP, LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 17, 2016, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 2, 2016.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160602-2503
You may verify this electronic certificate
online at http://www.nvsos.gov/