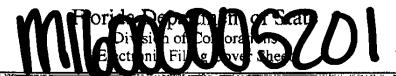
Division of Corporations

https://efile.sunbiz.org/scripts/efilcovr.exe



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Addross	

### Foreign Limited Liability Company Rollins Enterprises, LLC

Certificate of Status	
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Help

850-617-6381

6/28/2016 11:35:06 AM PAGE 1/001 Fax Server



June 28, 2016

FLORIDA DEPARTMENT OF STATE

CORPORATE CREATIONS INTERNATIONAL INC. Of Corporations

SUBJECT: AJR ENTERPRISES, LLC

REF: W16000045146

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

You must insert the title or dapadity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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

FAX Aud. #: E16000153000 Letter Number: 216A00013560

SECRETARY OF STATE

13358

533

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P.O BOX 6327 - Tallahassec, Florida 32314

860-617-6381

6/24/2016 11:09:59 AM PAGE 1/001 Fax Server



June 24, 2016

#### FLORIDA DEPARTMENT OF STATE

CORPORATE CREATIONS INTERNATIONAL INC

SUBJECT: ROLLINS ENTERPRISES, LLC

REF: W16000045146

We received your electronically transmitted document. However, the companies and the complete document, including the electronic filing cover sheet.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is P01000098733.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Jema D Harris
Regulatory Specialist II

in

FAX Aud. #: H16000153000 Letter Number: 616A00013335

P.O BOX 6327 - Tallahassee, Florida 32314

## 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:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
AJR Enterprises, 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.")
Delaware
2. Useful Value of Which foreign limited liability (FEI number, if applicable) company is organized)
4
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 3737 Collins Avenue, #S-603, Miami Beach, FL 33139
(Street Address of Principal Office)
6. 21700 Oxnard Street, #2030, Woodland Hills, CA 91367
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
<del>-</del>
Aaron Rollins - Manager - 21700 Oxnard Street, #2030, Woodland Hills 26A 93367
्विद्र निव
8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under outhof the translato
must be submitted)
$\sim$
Signature of an authorized person (In accordance with section 605 0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are an aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a.817.155, F.S.)
Aaron Rollins, Manager

Typed or printed name of signee

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

STATUTES, FOLLOWING	THE UNDERSIGNED LIN	F SECTION 605.0113 or 605.0902 (1 MITED LIABILITY COMPANY SU GNATE A REGISTERED OFFICE A	BMITS THE
	of the Limited Liability Co Enterprises, L	• •	
If unavailable	e, the alternate to be used in	the state of Florida is:	
2. The name	and the Florida street addr	ess of the registered agent and office	are:
	eResidentAg	gent, Inc.	
		(Name)	EA 5
	236 E 6th Ave.		
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	28
	Tallahassee	<sub>Er</sub> 32303	
		City/State/Zip	AN II: 12  STATE FILORIDA
liability comp registered ag statutes relati	pany at the place designated ent and agree to act in this ing to the proper and compl ligations of my position as t	and to accept service of process for the in this certificate, I hereby accept the capacity. I further agree to comply we lete performance of my duties, and I deep in the capacity agent as provided for in Company of the capacity.  Signature	ne appointment as with the provisions of all am familiar with and

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "ROLLINS ENTERPRISES, 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 THIRTY-FIRST DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROLLINS ENTERPRISES, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2016.

6052572 8300 SR# 20164043666

Authentication: 202403653

Date: 05-31-16

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