(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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AUG 1 9 2016 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT	NO.	:	12000000019	5

REFERENCE: 258230 7566107

AUTHORIZATION : Smell Clara

COST LIMIT : (\$\\130.00

ORDER DATE : August 17, 2016

ORDER TIME : 9:29 AM

ORDER NO. : 258230-005

CUSTOMER NO: 7566107

FOREIGN FILINGS

NAME: JF RETAIL SERVICES, LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

COVER LETTER

TO: Registration Section Division of Corporation	ns		
SUBJECT: JF R	etail Service	S LLC Limited Liability Company	y
The enclosed "Application by For Existence, and check are submitte	reign Limited Liability Comp ed to register the above refer	pany for Authorization to l enced foreign limited liabi	Fransact Business in Florida," Certificate of lity company to transact business in Florida
Please return all correspondence	concerning this matter to the	following:	
	James N	Mathews ame of Person	
	Techsh	IM/Company	19) Just Fabulous, Inc.
-	800 Apollo	5†. Address	
	E Sequ	tate and Zip Code	0)45
	E-mail address: (to be use	us a just fall d for future annual report i	o . Com
For further information concernin	g this matter, please call:		:
Jessia Man	MOULUAN of Contact Person	_at (310) 68 Area Code D	33-0140 ext 1075 Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Divisio Registi Clifton 2661 E	ET ADDRESS: on of Corporations ration Section Building Executive Center Circle assee, FL 32301
Enclosed is a check for the follow \$125.00 Filing Fee	ving amount: \$\forall \forall \forall 130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	□ \$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 605.0002, 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.") (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 (Jurisdiction under the law 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) (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee , Florida 32301 (City) 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, Melissa Zender Asst. Vice President tered agent's signature) 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) 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. Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "JF RETAIL SERVICES, 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 FIFTEENTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JF RETAIL SERVICES, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF APRIL, A.D. 2015.

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

To and the second

Authentication: 202831294

Date: 08-15-16

5732635 8300 SR# 20165371827

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