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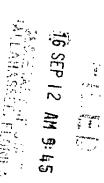
(Re	equestor's Name)					
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(Document Number)						
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SEP 1 5 2016 Y SULKER

W16 48487



July 13, 2016

ALBERT CORRADA 2655 LEJEUNE ROAD SUITE 902 CORAL GABLES, FL 33134 US

SUBJECT: JAPPYCORP LLC Ref. Number: W16000048487

We have received your document for JAPPYCORP LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 616A00014629

COVER LETTER

TO:	Registration Section Division of Corporation	ns					
SUBJE	Jappycorp LLC						
		Name of I	Limited Liability	Company			
The en Exister	closed "Application by Fornce, and check are submitte	eign Limited Liability Comp d to register the above refero	any for Authoriz enced foreign lim	ation to Tra ited liability	nsact Business in Florida," Cert company to transact business i	titicate (in Florid	
Please	return all correspondence of	concerning this matter to the	following:				
	Albert Corrada						
		Ni	ame of Person				
	Albert Corrada	, CPA					
	Firm/Company						
	2655 LeJeune l	Road. Suite 902					
		Address					
	Coral Gables, I	FL 33134					
	 	City/S	tate and Zip Code	2			
	acorrada@corrad	lacpa.com					
		E-mail address: (to be used	d for future annua	l report not	ification)		
For fu	rther information concerning	g this matter, please call:					
	Albert Corrada		305 at (804-85			
	Name o	of Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section uilding centive Center Circle see, FL 32301		
Enclos	sed is a check for the follow \$125.00 Filing Fee	ring arnount: \$\Bigsim \text{\$\exitt{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\}}}\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\e	□ \$155.00 Fil Certified Copy	_	☐ \$160.00 Filing Fee, Certified Status & Certified Copy	lcate	

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 RUSINESS IN THE STATE OF FLORIDA:

Jappycorp LLC	ign Limited Liability Company; must	t include "Limited Ligh	ulity Company "" I C " or	"IIC")	
(Name of Fore	ign Limited Liability Company; musi	t include Limited Liat	unity Company. L.E.C., or	LLC.)	
Liability Company," "L.L.C,"	ternate name adopted for the purpose or "LLC.")	of transacting business	s in Florida. The alternate nam	e must include "Limit	ed
2. Delaware		3			
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)		
4	Date first transacted business	ss in Florida if naior to	projetration)	-	
2655 LeJeune Road, St	(Date first transacted busines (See sections 605.0904 & 605.0	0905, F.S. to determine	penalty liability)		
J				-	
Coral Gables, FL 33134		105		_	
6. 2655 LeJeune Road, Su	(Street Address of P	rincipal Office)			
6. 2033 Leseulle Road, 3d	110 902			_	
Coral Gables, FL 33134				_	
	(Mailing A	Address)			
7. Name and street address	s of Florida registered agent: (P.0	O. Box NOT accept	able)		
Name:	Albert Corrada		_	All SE	
Office Address:	2655 LeJeune Road, Suite 902		_	21.0	16
	Coral Gables		, Florida 33134		المادة أسد أ
	(City)		(Zip code)	· · · · · · · · · · · · · · · · · · ·	y a :
designated in this applicate to complywith the provision	gistered agent and to accept serviton, I hereby accept the appoint ons of all statutes relative to the p my position as registered agent.	ment as registered a proper and complete 1	gent and agree to act in the performance of my duties	lity company it the is capacity. I furth	er agree
	(Registe	ered agent's signature)			
8. The name, title or capa Paulina Bueno Villacorta,	acity and address of the person(s)	who has/have author	ity to manage is/are:		
rauma Bueno Vinacorta,	Wichiber				
	ALTO ALL DE SECTION AND ALL DE S				
				·····	
	The Market		gn language, a translation o		
This document is executed submitted in a document to	d in accordance with section 605.0 the Department of State constitu	0203 (1) (b), Florida i ites a third degree fel	Statutes. I am aware that an ony as provided for in s.817	y false information 7.155, F.S.	

Typed or printed name of signee

Paulina Bueno Villacorta

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "JAPPYCORP, 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 FIRST DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JAPPYCORP, LLC" WAS FORMED ON THE FOURTEENTH DAY OF JUNE, A.D. 2016.

Authentication: 202928590

Date: 09-01-16

6068237 8300 SR# 20165628724