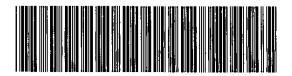
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2016 DEC 22 P U: 15
SECKETYSTSEE, FLORIDS

D BRUCE



340 N. Westlake Blvd. | Suite 210 | Westlake Village, CA 91362

December 8, 2016

Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32314

RE: J & E Billing and Collection Services, LLC

To whom it may concern:

The Enclosed Application by Foreign LLC and Fee(s) are submitted for filing. Also, please find enclosed a check for state filing fees in the amount of \$155.00 made payable to the FL Dept. of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addresses stamped envelope included.  $\Rightarrow_{n}$ 

Sincerely,

Amanda J. Beren, Sr. Document Analyst CorpNet, Incorporated 888-449-2638 Ext. 105 aberen@corpnet.com 16 DEC 22 P 4: |



December 12, 2016

CORPNET, INCORPORATED ATTN: AMANDA J. BEREN 340 N. WESTLAKE BLVD, STE 210 WESTLAKE VILLAGE, CA 91362

SUBJECT: J & E BILLING AND COLLECTION SERVICES, LLC

Ref. Number: W16000082718

We have received your document for J & E BILLING AND COLLECTION SERVICES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$155.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 616A00026291

ON DEC 22 P IN 15

## 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. J & E Billing and Collection Services, LLC	
(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.")	i
2. New York 3	
(Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)	
4. (Date first transacted business in Florida, if prior to registration.)	
(See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
5. 56 Smith Street	
Lake Ronkonkoma, NY 11779	
(Street Address of Principal Office)	
6. 56 Smith Street	
Lake Ronkonkoma, NY 11779	_
(Mailing Address)	<u> </u>
7. The name, title or capacity and address of the person(s) who has/have authority to manage is are:	•
Jacqueline Martinez, Member, 56 Smith Street, Lake Ronkonkoma, NY 11779	<b>≀</b> }
Elizabeth Cruz, Member, 56 Smith Street, Lake Ronkonkoma, NY 11779	
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 oath of the translation.	
(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 at arm 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.)	re true. I
Jacqueline Martinez	

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	of the Limited Liabil	lity Company is:		
J & E Billing	and Collection Serv	ices, LLC		
If unavailable,	the alternate to be u	used in the state of Florida is:		
2. The name a	and the Florida stree	t address of the registered agent and office are:		~
	Registered Agent	ts Inc.		
		(Name)	2016 SEC	
	3030 N. Rocky Point Dr., Ste. 150A		S DEC 2	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		22 ARY SSE	
	Tampa	FL 33607		
		City/State/Zip	E 15	

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 certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## State of New York Department of State } ss:

I hereby certify, that J & E BILLING AND COLLECTION SERVICES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/19/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.



3-3-3-

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 06th day of December two thousand and sixteen.

Brendan W. Fitzgerald

Executive Deputy Secretary of State