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(Re	equestor's Name)
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PICK-UP	
(Bu	usiness Entity Name)
(De	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only

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02/13/17--01027--011 **125.00





COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT:

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Frederick Williams

Name of Person

Firm/Company

28401 SW 147th ave

Address

Homestead, FL 33033

City/State and Zip Code

frederick@jithomesolutions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please cull:

Frederick Williams	786 at (563-9175
Name of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS:		STREET ADDRESS:
Division of Corporations		Division of Corporations
Registration Section		Registration Section
P.O. Box 6327		Clifton Building
Tallahassee, FL 32314		2661 Executive Center Circle
		Tallahassee, FL 32301
*		
Enclosed is a check for the following amount:		
🖬 \$125.00 Filing Fee 👘 \$130.00 Filing Fe	e & 🛛 🗖 \$155.00 Filing	g Fee & 👘 🖾 \$160.00 Filing Fee, Certificate

Certified Copy

of Status & Certified Copy

Certificate of Status

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, PLORILLA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN-UMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF PLORIDA:

1 JIT PROPERTY SOLUTIONS, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, outer alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company." "L.L.C," or "LLC.") Nevada 2 (Jurischetion under the law of which foreign limited liability company is organized) (FEI number, if applicable) 1 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 28401 SW 147th Ave Homestead, FL 33033 5 (Street Address of Principal Office) 6 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) **Business Filings Incorporated** Name: 1200 South Pine Island Road Office Address: Florida 33324 (Zip code) Plantation (City)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this cupacity. I further agree to comply with 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.

(Registered agent's signature) Mark willions, AVP, Business Fili

Dece or

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Frederick Williams Mgr 28401 SW 147th Ave Homestead, FL 33033

9. Attached is a cartificate 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 cartificate is in a foreign language, a translation of the cartificate under oath of the translator must be submitted) $\int_{-\infty}^{\infty} \int_{-\infty}^{\infty} dx$

quature 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.

Frederick Williams

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 1 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, **JIT PROPERTY SOLUTIONS, 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 January 5, 2017, and is in good standing in this state.



Electronic Certificate Certificate Number: C20170120-2126 You may verify this electronic certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 20, 2017.

Barhara K. Cegarske

BARBARA K. CEGAVSKE Secretary of State