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D. SCOTT MAY 1 9 2017

## **COVER LETTER**

TO: Registration Section

Div	ision of Corporation	ns					
SUBJECT:	JWCRENOVATIO	NSLLC					
	Name of Limited Liability Company					_	
The enclosed Existence, a	d "Application by For nd check are submitte	eign Limited Liability Comp d to register the above refere	eany for Authoriza enced foreign limi	ition to Tra ted liability	nsact Business in Florida company to transact bus	," Certificate of iness in Florida	
Please returr	all correspondence of	concerning this matter to the	following:				
	MARSHA SIH	IA .					
	Name of Person						
	INCFILE.COM LLC						
Firm/Company 17350 STATE HWY 249 SUITE 220						_	
		Address					
	HOUSTON T	X 77064 .					
	City/State and Zip Code						
	jwigder@live.c	om					
		E-mail address: (to be used	l for future annua	report not	fication)	_	
For further is	nformation concernin	g this matter, please call:					
MA	ARSHA SIHA		888 at (	462-34	53X 701		
	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 of Registrati Clifton Bi 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	D WY 18 PH		
	a check for the follow \$125.00 Filing Fee	ring amount:  \$\square\$ \$\square\$ \$\square\$ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy		□ \$160.00 Filing Fee, (of Status & Certified Co	Certificate O	

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

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

, JWC Renovations,LL	C				
•		ompany; must include "Limit	ed Liability Company," "L.L.C.," o	r "LLC.")	
(If name unavailable, enter al Liability Company," "L.L.C,"		r the purpose of transacting b	ousiness in Florida. The alternate na	ime must include "Limited	
2. NEW JERSEY	·	3			
(Jurisdiction under the law	e)				
company is organized)  N/A					
4	(Date first trans	acted business in Florida, if p 0904 & 605.0905, F.S. to de	prior to registration.)	_	
5. 2501 Vroom Dr	(See sections 605.)	0904 & 605.0905, F.S. to de	termine penalty liability)		
Bridgewater, NJ 088				_	
	(Street	Address of Principal Office)		_	
6. 2501 Vroom Drive				<u> </u>	
Bridgewater, NJ 088	307				
		(Mailing Address)		_	
7. Name and street address	s of Florida registered	agent: (P.O. Box NOT	acceptable)		
Name:	DAN WOLK				
Office Address:	4417 13th St. S	UITE 108			
	St Cloud, FL		, Florida 34769 (Zip code)		
		(City)	(Zip code)	<del></del>	
designated in this applica	gistered agent and to tion, I hereby accept t ons of all statutes rela	the appointment as regist ntive to the proper and con red agent.	for the above stated limited lial ered agent and agree to act in t mplete performance of my dutic	his capacity. I further agree	
		(Registered agent's sign	nature)		
8. The name, title or capa Jacqueline Wigder- AM	•	•	authority to manage is/are: J 08807	70.3	
				表 18 FILEI	
jurisdiction under the law of the translator must be si	of which it is organize ubmitted)	ed. (If the certificate is in a	thenticated by the official having a foreign language, a translation	of the certificate under oath	
This document is executed submitted in a document to	d in accordance with second the Department of St	ection 605.0203 (1) (b), Fl	orida Statutes. I am aware that a	ny false information	

Ta Caueline Wigaer
Typed or printed name of signee

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

JWC RENOVATIONS, LLC 0450137944

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on January 30, 2017.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

JACQUELINE WIGDER 2501 VROOM DR BRIDGEWATER, NJ 08807



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of May, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6079816835

Verify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp

