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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: JIM Holdings LLC				
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:				
Jim Rodney				
Name of Person				
Jim Holdings LLC				
6612 BAYT (ONT) I Ve				
Address				
Mugate, Fluida, 33063 City/State and Zip Code				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Jim Kodney at 718, 682-6779				
Name of Contact Person Area Code Daytime Telephone Number				
MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations				
Division of Corporations Registration Section Division of Corporations 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: \$\Boxed{1} \\$125.00 \text{ Filing Fee} \Boxed{1} \\$130.00 \text{ Filing Fee} & \Boxed{1} \\$160.00 \text{ Filing Fee, Certificate}\$				
Certificate of Status Certified Copy of Status & Certified Copy				



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 17, 2017

JIM RODNEY 6612 BAYFRONT DRIVE MARGATE, FL 33063

SUBJECT: JIM HOLDINGS LLC Ref. Number: W17000042029

2017 HAY 26 PH 12: 46
SECRETARY OF STATE
SECRETARY OF STATE

We have received your document for JIM HOLDINGS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L15000199601.

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$777.50.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

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

Jenna D Harris Regulatory Specialist II

Letter Number: 417A00009870

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA ST COMPANY TO TRANSACT BUSINESS IN THE STATE OF I		SUBMITTED TO REGISTER A	FOREIGN LIMITED LIABILITY
1. Jim Holdings LL (Name of Foreign Limited Liability Company; m Jehn Holdings LL	ust include "Limited Liability Com	pany," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of trans 2.	acting business in Florida. The alternate 3	name must include "Limited Liability C 16-291-2509 (FEI number, if a	ompany," "L.I.C," or "I.I.C.") pplicable)
4. January P (Date first transacted business (See sections 605.0904 & 605	in Florida, if prior to registration.) .0905, F.S. to determine penalty liability) 1 1	_
5. 6612 BAY front D(ive (Street Address of Principal Office) Malgate, F1. 33063	6. <u>6</u>	612 BAYT(3 M Mailing Address)	<u>† Dive</u> 33063
7 None and attended to Still and an analysis and a		, alala	2017 HAY
7. Name and street address of Florida registered as Name:	Odney		Y 26
Office Address: 6612 B	Avfront Dry Florida	Je _, Florida <u> </u>	
Registered agent's acceptance: Having been named as registered agent and to acc designated in this application, I hereby accept the to comply with the provisions of all statutes relative and accept the obligations of my position as regist	appointment as registered a e _t to the proper and complet	gent and agree to act in thi	is capacity. I further agree
8. The name, title or capacity and address of the permitted or Capacity: Name and Ad Name and Ad Name and Ad			me and Address:
Margate,	F1.33063		
(Use attachments if necessary)		<u></u>	
 Attached is a certificate of existence, no more tha jurisdiction under the law of which it is organized. (of the translator must be submitted) 			
· · · · · · · · · · · · · · · · · · ·	Signature of an authorized pe	ly roon	-
10. This document is executed in accordance with so submitted in a document to the Department of State	odion 605.0203 (1) (b), Floriconstitutes a third degree feld	ida Statutes. I am aware that ony as provided for in s.817.	any false information 155, F.S.
J_m	Kodne	y.	-

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

05/08/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Jim Holdings LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

OF THE COUNTY OF

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC170508100374-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx