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(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL
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## COVER LETTER

TO:

**Registration Section** 

Div	ision of Corporations		
SUBJECT:	BJPM, LTD d/b/a BJPM LLC		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of	Limited Liability Company	
	d "Application by Foreign Limited Liability Com and check are submitted to register the above refer		
Please return	all correspondence concerning this matter to the	following:	
	Amy K. Maliza, Esq.		
	N	ame of Person	
	di Santo Law PLLC		
	F	irm/Company	· · · · · · · · · · · · · · · · · · ·
	429 Lenox Avenue, Suite 417		
		Address	
	Miami Beach, FL 33139		
	City/S	itate and Zip Code	2017   SEC   ALL,
	amaliza@disantolaw.com		
For further in	E-mail address: (to be use nformation concerning this matter, please call:	d for future annual report notific	SSEE. F
An	ny K. Maliza, Esq.	305 587-2700 at (	L 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
<del></del>	Name of Contact Person		ne Telephone Number
Div Reg P.O	AILING ADDRESS: rision of Corporations gistration Section D. Box 6327 lahassee, FL 32314	Registration Clifton Buil	Corporations Section ding tive Center Circle
	a check for the following amount:  \$125.00 Filing Fee		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

## 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:

OH		or to registration ) retermine penalty liability)	(FEI munber, if applicable)	C," or "I,I,C "} —
(Junsdiction under the law of which 07/31/2017  3355 RICHMOND ROA (Street Address of Prince)	(Date first transacted business in Florida, if price (See sections 605,0904 & 605,0905, F.S. to de	etermine penalty liability)	(FEI number, if applicable)	<del></del>
07/31/2017  3355 RICHMOND ROA  (Street Address of Princet)	(Date first transacted business in Florida, if price (See sections 605,0904 & 605,0905, F.S. to de	etermine penalty liability)	(FEL number, if applicable)	
3355 RICHMOND ROA (Street Address of Prin	(See sections 603,0904 & 603,0903, F.S. to de	etermine penalty liability)		
(Street Address of Prince	(See sections 603,0904 & 603,0903, F.S. to de	etermine penalty liability)		
(Street Address of Prince	D			
(Street Address of Prince				
		6. <u>3355 RICHMOND</u>		
	•	BEACHWOOD, OI	failing Address)	
		BEACHWOOD, O	<del></del>	
		<del>_</del>	<u>F</u>	
			AUG AHA AHA	$\Box$
Name and street address of	f Florida registered agent: (P.O. F	Box NOT acceptable)	(0?)	
F	ED SOUTH BEACH, LLC		- 8 - 8 - 8	
Name:	ED 300 TH BEACH, LEC		m <sub>c.</sub>	
Office Address:	19 WASHINGTON AVENUE		<u> </u>	
		<del></del>	<b>25</b>	
<u></u>	IIAMI BEACH	, Florida 331	39 👼 🖛	
gistered agent's acceptai	(City)		(Zip code)	
	my position as registered agent.	per and complete performance	e to act in this capacity. of my duties, and I am	I further familiar w
-	my position as registered agent.		e to act in this capacity. of my duties, and I am	I further familiar n
_	my position as registered agent.  (Kegistered age		e to act in this capacity. cof my duties, and I am	I further familiar n
The name, title or capacit	(Kegislered age	ur's vigniture)	of my duties, and I am	I further familiar n
The name, title or capacit  Title or Capacity:	my position as registered agent.	ur's vigniture)	of my duties, and I am	familiar n
Title or Capacity:	y and address of the person(s) who	o has/have authority to manage i	of my duties, and I am	familiar n
The name, title or capacit  Title or Capacity:  MANAGER	y and address of the person(s) who  Name and Address:  BRAD FRIEDLANDER	has/have authority to manage in Title or Capacity:	of my duties, and I am	familiar n
Title or Capacity:	y and address of the person(s) who	has/have authority to manage in Title or Capacity:	of my duties, and I am	familiar n
Title or Capacity:	y and address of the person(s) who  Name and Address:  BRAD FRIEDLANDER  3355 RICHMOND ROAD	has/have authority to manage in Title or Capacity:	of my duties, and I am	familiar n
Title or Capacity:	y and address of the person(s) who  Name and Address:  BRAD FRIEDLANDER  3355 RICHMOND ROAD	has/have authority to manage in Title or Capacity:	of my duties, and I am	familiar n
Title or Capacity:	y and address of the person(s) who  Name and Address:  BRAD FRIEDLANDER  3355 RICHMOND ROAD	has/have authority to manage in Title or Capacity:	of my duties, and I am	familiar n
Title or Capacity:	y and address of the person(s) who  Name and Address:  BRAD FRIEDLANDER  3355 RICHMOND ROAD	has/have authority to manage in Title or Capacity:	of my duties, and I am	familiar n

Typed or printed name of squiec

## UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show BJPM, LTD., an Ohio Limited Liability Company, Registration Number 1680429, was organized within the State of Ohio on February 20, 2007, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 31st day of July, A.D. 2017.

**Ohio Secretary of State** 

Jon Hastel

Validation Number: 201721201656