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D. SCOTT

## JAPA1 LLC 8386 Cypress Hollow Dr. Sarasota, FL 34238

January 3,2018

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

Dear Sir or Madam,

I am requesting the authority to do business in the state of Florida. We are a LLC registered in the state of Wyoming. I have included a certificate of Good Standing from the Secretary of State of Wyoming issued today, January 3 2018 that we are in good standing.

We are real estate investors who have our primary residence in Sarasota Florida.

Thank you in advance for your assistance in this matter.

Respectfully,

Philip J. Arsenault, Co-manager

2018 JAN -5 P 1: S SECRETARY OF STAIL

### COVER LETTER

Registration Section -

TO:

Division of Corporations	
SUBJECT:	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Flori	
Please return all correspondence concerning this matter to the following:	
PHILIP ARSENAULT - (O MANAGER	
JAPAI LLC Firm/Company	
9386 CYPRESS HOLLOW DR.	
SARASOTA FL 34238 City/State and Zip Code	
PHILABO O GMAIL - COM  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
For further information concerning this matter, please call:    DHCLIP ARSENAULT at (508) 8647506555   Name of Contact Person   Area Code   Daytime Telephone Number   The Code   Daytime Telephone   The Code   Daytime Tel	
MAILING ADDRESS:  Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Registration Section 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	

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

IN COMPILANCE 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: d Liability Company, must include "Limited Liability Company," "L.L.C.," or "LT.C.") (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 "L.L.C.") (Jurisdiction under the law of which foreign limited liability company is organized) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Office Address: Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability columny at the designated in this application, I hereby accept the appointment as registered agent and agree to act in this appartly. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I um familiar with and accept the obligations of my position as registered agent. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: (Use attachments if necessary) 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section \$05,0203 (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.

# STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

#### **JAPA1 LLC**

is a

# **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **July 7**, **2017**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000760769**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 3rd day of January, 2018 at 9:22 AM. This certificate is assigned 025097023.



Secretary of State

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SUGRETERY OF STATE

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.