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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

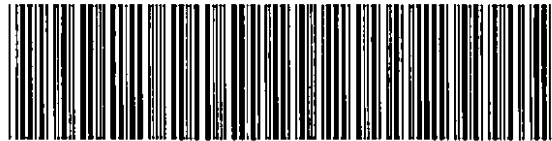
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JAN 17 2018  
J. HARRIS

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KEWJ FINANCIAL MANAGEMENT SOLUTIONS, 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:

KATHIE JOHNSON

Name of Person

KEWJ HOLDINGS, LLC, dba KEWJ FINANCIAL MANAGEMENT SOLUTIONS, LLC

Firm/Company

2483 HERITAGE VILLAGE, SUITE 16354

Address

SNELLVILLE, GA. 30078

City/State and Zip Code

WRIGHT702@BELLSOUTH.NET

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

For further information concerning this matter, please call:

KATHIE JOHNSON

770

7140319

at ( )

Name of Contact Person

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☒ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

RECEIVED  
JUN 10 2003

714



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 30, 2017

KATHIE JOHNSON  
2483 HERITAGE VILLAGE, SUITE 16354  
SNELLVILLE, GA 30078

SUBJECT: KEWJ FINANCIAL MANAGEMENT SOLUTIONS, LLC  
Ref. Number: W17000095096

We have received your document for KEWJ FINANCIAL MANAGEMENT SOLUTIONS, 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):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or 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: 417A00024188

2018 JAN 10 11:25

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

IN COMPLIANCE WITH SECTION 605.0602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. KEWJ FINANCIAL MANAGEMENT SOLUTIONS, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

KEWJ HOLDINGS, LLC

(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 "LLC.")

2. GEORGIA SECRETARY OF STATE 3. 82-3230282  
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. will be after registration  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

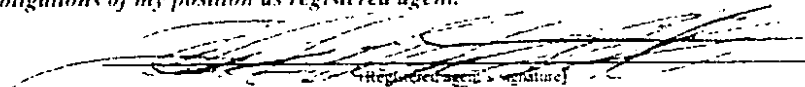
5. 2483 HERITAGE VILLAGE, SUITE 16354 6. 2483 HERITAGE VILLAGE, SUITE 16354  
(Street Address of Principal Office) (Mailing Address)  
SNELLVILLE, GEORGIA 30078 SNELLVILLE, GEORGIA 30078  
(770) 714-0319 (770) 714-0319

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: JOHN WRIGHT  
Office Address: 463688 STATE ROAD 200, SUITE 1-518  
YULEE, Florida 32097  
(City) (zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place  
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. 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)

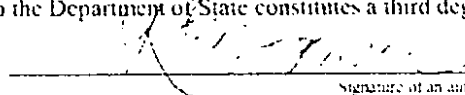
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>PRESIDENT/CEO</u>	<u>KATHIE JOHNSON</u> <u>2483 HERITAGE VILLAGE #16354</u> <u>SNELLVILLE, GA. 30078</u>		
<u>ADMINISTRATOR</u>	<u>JOHN WRIGHT</u> <u>463688 STATE ROAD #1518</u> <u>YULEE, FL 32097</u>		

(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 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.

  
(Signature of an authorized person)

KATHIE JOHNSON, PRESIDENT/CEO

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Brian P. Kemp**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### **KEWJ Financial Management Solutions, LLC**

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 15079130  
Date Inc/Auth/Filed: 10/10/2017  
Jurisdiction : Georgia  
Print Date : 01/12/2018  
Form Number : 211



Brian P. Kemp  
Secretary of State