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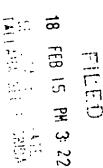
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COVER LETTER

	Division of Corporation	ns	,	Š.	
SUBJEC	T: JAP ENTERP	RISE GROUP, LLC			
		Name of	Limited Liability	Company	
The encl	osed "Application by Fo e, and check are submitt	reign Limited Liability Com ed to register the above refer	pany for Authoriz renced foreign lim	ation to Tr ited liabili	ransact Business in Florida," Certificate of ty company to transact business in Florida
Please re	turn all correspondence	concerning this matter to the	e following:		
	Jahmaal A		Jame of Person		
		r	vame of Person		
	JAP ENTE	RPRISE GROUP, LL	<u>C</u>		
		F	irm/Company		
	5004 E. Fow	vier Ave Ste C134			
			Address		
	Tampa, FL	33617			
		City/S	State and Zip Code		
	japjarrett@h				
		E-mail address: (to be use	d for future annual	report no	tification)
For furthe	er information concernin	g this matter, please call:			
	Jahmaal A Jarrett		at (813	_ ₎ 363-1	1210
	Name o	of Contact Person	Area Code	Day	time Telephone Number
! !	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle duee, FL 32301
	is a check for the follow ■ \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g 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:

ii name unavanable, enter a Liability Company," "L.L.C	alternate name adopted for the purpose of transacting business in Florida. The alternate name adopted for the purpose of transacting business in Florida. The alternate name adopted for the purpose of transacting business in Florida.	ernate name must include "Limited
NEVADA		
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if a	pplicable)
l		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 5004 E. Fowler Ave Ste	C134	
Tampa, FL 3361	7	
	(Street Address of Principal Office)	
5 5004 E. Fowler Ave S	Ste C134	2 8
Tampa, FL 33617		76
- Tampa, 1 E 000 17	(Mailing Address)	5 <u>[</u>
Name and street addre	ss of Florida registered agent: (P.O. Box NOT acceptable)	교육
Name:	Jahmaal A Jarrett	ب میر پ ـ _{نی}
		22 11 15 14
Office Address:	5004 E. Fowler Ave Ste C134	-
	Tampa Florida 33617	7
	, 1 10 (Ida	<u>/</u>
	(City) (Zip	code)
lesignated in this applica o complywith the provisi accept the obligations of	(City) Otance: registered agent and to accept service of process for the above stated limition, I hereby accept the appointment as registered agent and agree to ions of all statutes relative to the proper and complete performance of may position as registered agent. (Registered agent's signature) active and address of the person(s) who has/have authority to manage is/ar	code) ited liability company at the place act in this capacity. I further ag ny duties, and I am familiar with
Having been named as relesignated in this applicate complywith the provising cept the obligations of the same, title or capa	(City) Otance: registered agent and to accept service of process for the above stated limitation, I hereby accept the appointment as registered agent and agree to ions of all statutes relative to the proper and complete performance of may position as registered agent. (Registered agent's signature) active and address of the person(s) who has/have authority to manage is/ar	code) ited liability company at the place act in this capacity. I further ag ny duties, and I am familiar wit

Typed or printed name of signee

Jahmaal A Jarrett

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **JAP ENTERPRISE GROUP**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 11, 2018, and is in good standing in this state.

GEAL OF THE OF T

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 6, 2018.

Ballack. Cagaste

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20180206-1813
You may verify this electronic certificate
online at http://www.nysos.gov/