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(R	requestor's Name)
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PICK-UP	WAIT MAIL
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Certified Copies	Certificates of Status
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COVER LETTER

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: A. J. Browning Construction, 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:
Karen S. Browning Name of Person
A. J. Browning Construction, LLC.
356 Golfview Road, Apt. 810
North Palm Beach, FL. 33408 City/State and Zip Code
Karen brauning 356@ amail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Karen Browning at 301 616-9173 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: \$\Begin{array}{c c c c c c c c c c c c c c c c c c c

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

1	MB.IIC	·	111111. A 21277	
(Name of Foreign) 4	· //	Liability Company," "L.L.C.," or "	шс.т) 1 /
(If name unavailable, enter alternate a) <u>FOUPNO</u> into adopted for the purpose of		ida. The alternate name must include "Lim	tted Liability Company," "L.L.C," or "LLC.")
2. State of (Jurisdiction under the law of w	Marylan	otopowy is organized)	3. <u>82-2</u>	171330 Et namber, if applicable)
4	(Date first transacted by	usiness in Florida, if refer to r	reintration.)	
701 0 16	(See sections 605,0904	usiness in Florida, if prior to r & 605.0905, F.S. to determin	oc penalty liability)	Port At
S. 356 GOTT	VICW TOQU	d. Apt. 810	6. <u>306 C70/T</u>	-view Road Apt.
North Pale	n Beach,	FL 33468	North Hali	m Beach, FL 334
				产品 王 五
7. Name and street addre	s of Florida registere	ed agent: (P.O. Box	NOT acceptable)	製や下
Name:	_Mren	Brownin	g	
Office Address:	356 Gi	off view T	Road Apt. 810	型がま
	1// 1/	01 2	/ 5	21/Ad 500 6
	// 107th	WAIM I'D	2006 Florida O	
Having been named as re designated in this applica- to comply with the provis	gistered agent and t tion, I hereby accept ions of all statutes re	t the appointment a elative to the proper	s registered agent and agree .	(Zip code) imited liability company at the pla to act in this capacity. I further a of my duties, and I am familiar wi
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Typed or printed name of signee

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT JKMB, LLC (W18136358), REGISTERED JULY 14, 2017, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MARCH 01, 2018.

Michael L. Higgs

Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

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