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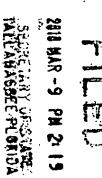
| (Requestor's Name) |
|-----------------------------------------|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
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| |

Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | ş | | | |
|----------------------------------------------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------------------------|
| SUBJECT: JKLM PROPER | TY SOLUTIONS, LL | .C | | |
| | Name of | Limited Liability Cor | mpany | |
| The enclosed "Application by Fore Existence, and check are submitted | | | | |
| Please return all correspondence co | oncerning this matter to the | following: | | |
| John J. Murr | | | | |
| | N | ame of Person | | |
| JKLM PROF | PERTY SOLUTIONS | , LLC | | |
| | F | irm/Company | | |
| 14910 N. E | Dale Mabery Hwy | Unit 341105 | | |
| | | Address | | _ |
| Tampa,FL 3 | 3618 | | | |
| | City/S | tate and Zip Code | | |
| jmurp1962@g | ımail.com | | | |
| <u>/************************************</u> | E-mail address: (to be used | d for future annual re | port notification) | |
| For further information concerning | this matter, please call: | | | |
| John J. Murphy Jr. | | at (813 | 401-2488 | |
| Name of | Contact Person | Area Code | Daytime Telep | phone 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 followin | ng amount: ☐ \$130.00 Filing Fee & Certificate of Status | □ \$155.00 Filing F Certified Copy | | 00 Filing Fee, Certificate & 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:

| 1. JKLM PROPERTY S (Name of For | OLUTIONS, LLC eign Limited Liability Company; must include | "Limited Liability Company," "L.L.C.," or " | LLC.") |
|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| (If name unavailable, enter a Liability Company," "L.L.C. | Iternate name adopted for the purpose of transa," or "LLC.") | cting business in Florida. The alternate name | e must include "Limited |
| 2. NEVADA | 3. | | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI number, if applicable) | |
| 4 | (Date first transacted business in Flori | da, if prior to registration.) | |
| | (See sections 603.0904 & 603.0903, F.S | . to determine penalty liability) | |
| 5. 14910 N. Dale Mabe | ery Hwy Unit 341105 | | |
| Tampa,FL 33618 | l . | | |
| | (Street Address of Principal C | Office) | ₫ :≧ |
| 6. 14910 N. Dale Ma | abery Hwy Unit 341105 | | |
| Tampa,FL 33618 | | | A |
| Tampa,1 E 330 10 | (Mailing Address) | | 275 |
| 7. Name and street addre | ss of Florida registered agent: (P.O. Box) | NOT acceptable) | No. |
| Name: | John J. Murphy Jr. | <u></u> | NO REPORT OF |
| Office Address: | 14910 N. Dale Mabery Hwy Unit 341 | 105 | 5 |
| Office Address. | | | ≯ · · · = · |
| | Tampa (City) | , Florida 33618 (Zip code) | |
| designated in this applicate to complywith the provisi | egistered agent and to accept service of pration, I hereby accept the appointment as ions of all statutes relative to the proper as my position as registered agent. | registered agent and agree to act in this | s capacity. I further agree |
| 8. The name, title or cap | acity and address of the person(s) who has | have authority to manage is/are: | |
| John J. Murphy Jr., Ma | nager 14910 N. Dale Mabery Hwy U | Init 341105 Tampa,FL 33618 | |
| 9. Attached is a certificate jurisdiction under the law of the translator must be s | e of existence, no more than 90 days old, do of which it is organized. (If the certificate submitted) Signature of an adult | aly authenticated by the official having on its in a foreign language, a translation of the official having of the | the certificate under oath |
| | d in accordance with section 605.0203 (1) (to the Department of State constitutes a third | | |

Typed or printed name of signce

John J. Murphy Jr.

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, **JKLM PROPERTY SOLUTIONS**, **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 February I, 2018, and is in good standing in this state.

OF THE PARTY OF TH

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 26, 2018.

Ballons K. Cegevske

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20180226-0828
You may verify this electronic certificate

online at http://www.nvsos.gov/