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TO:

Registration Section

Divisio	on of Corporation	15						
SUBJECT: J/	ABEZ HOME	ENTERPRISES, LLC	;					
	· · · · · · · · · · · · · · · · · · ·		Limited Liability C	ompany				
		eign Limited Liability Com d to register the above refer						
Please return all	correspondence of	concerning this matter to the	following:					
	Steve Exar							
		N	lame of Person					
	JABEZ HOI	ME ENTERPRISES,						
		F	irm/Company					
	2824 Northwest 118th Dr							
			Address					
	Coral Sprin	gs, FL 33065						
		City/S	State and Zip Code					
	exantus_ste	ve@yahoo.com						
		E-mail address: (to be use	d for future annual	report not	ification)			
For further infor	rmation concernin	g this matter, please call:						
Stev	e Exantus		at (754	422-0	578			
	Name o	of Contact Person	Area Code	Day	time 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						
	eck for the follow 5.00 Filing Fee	ing amount: \$\Bigsim \text{\$130.00 Filing Fee & Certificate of Status}\$	□ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop			

IN FLORIDA

IN COMPLIANCE WITH SECTION 6051/902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. JABEZ HOME ENTE	RPRISES, LLC eign Limited Liability Company;	must include "Limited Liah	ility Company ""I. I. C. " or	(*I.C.*)
(Mano or Con-	organismod radomy dompady,		, company, commun, co	, 2007)
(If name unavailable, enter a Liability Company," "L.L.C.	Iternate name adopted for the pur " or "LLC.")	rpose of transacting business	in Florida. The alternate na	me 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 bu (See sections 605.0904 &	isiness in Florida, if prior to 605,0905, F.S. to determine	registration.) penalty liability)	
5 2824 Northwest 118	8th Dr			6
				聖台 二 一
Coral Springs, F	L 33065	of Principal Office)		與 美 产
6. 2824 Northwest	•	of Principal Office)		TILED WILLS
6. <u>2024 Northwest</u>	1100101			一部の基の
Coral Springs, FL 33				754 -
	(Maili	ing Address)		- 漫画
7. Name and street address	ss of Florida registered agent:	(P.O. Box NOT accepta	ble)	**************************************
Name:	Registered Agents In	IC.		
Name.		 		
Office Address:	3030 N. Rocky Point	Dr. STE 150A		
	Tampa		, Florida 33607	_
Registered agent's accep	(City))	(Zip code)	
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept stion, I hereby accept the appoint on sof all statutes relative to a my position as registered agents.	ointment as registered ag the proper and complete	ent and agree to act in th	is capacity. I further agree
	(Re	gistered agent's signature)		_
8. The name, title or capa	acity and address of the persor	n(s) who has/have authorit	ty to manage is/are:	
Steve Exantus, Ma	nager 2824 No	orthwest 118th Dr	Coral Springs, FL	33065_
Mercenieuse Exan	tus, Manager 2824 N	orthwest 118th Dr	Coral Springs, FL	33065
9. Attached is a certificate jurisdiction under the law of the translator must be si	of existence, no more than 90 of which it is organized. (If the	days old, duly authentica e certificate is in a foreign	ated by the official having a language, a translation o	custody of records in the
	Stone	Rion	11 tu	
	Signat	ture of an authorized person	v (u)	_
	*	•		

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.

Steve Exantus

Typed or printed name of signce

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, **JABEZ HOME ENTERPRISES**, **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 December 21, 2017, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on February 2, 2018.

Balliana K. Cegarste

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20180202-1202
You may verify this electronic certificate
online at http://www.nvsos.gov/