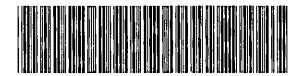
## M18000004318

| (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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| 1 A pricado                             |  |  |  |  |  |  |
| due, KA, pricado<br>W18-11484           |  |  |  |  |  |  |

Office Use Only



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PILED 2018 MAY -3 MM 10: OU FALLAHASSEE, FISIALE,



February 5, 2018

JENNIFER WEST 722 W LANCASTER AVW BERWYN, PA 19312

SUBJECT: JENNIFER ON THE AVENUE, LLC

Ref. Number: W18000011484

We have received your document for JENNIFER ON THE AVENUE, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please list the complete principal office address.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 718A00002366

RECEIVED APR 1 2 2010

## COVER LETTER

| TO: Registration Section Division of Corporation   | ns  |  |   |
|--|---|--|---|
| SUBJECT: Jenni-  | for an the Name of I  | Avenue<br>Limited Liability Company                              | ·····   |
| The enclosed "Application by For Existence, and check are submitte   | reign Limited Liability Comp<br>ed to register the above refere | pany for Authorization to Tra<br>enced foreign limited liability | insact Business in Florida," Certificate of veompany to transact business in Florida. |
| Please return all correspondence of  | concerning this matter to the                                   | following:   |   |
|  | Jennifer W  | lest<br>ame of Person  |   |
|  | Jennific on   | the <u>Dvenuz</u><br>m/Company                                   |   |
| - FW W   | 1 Lancostery  | V.Z. Address   |   |
| · Bes  | City/S  | 9378<br>tate and Zip Code  |   |
| <u>.</u>   | US 1 3 U444<br>E-mail address: (to be used                      | A Vahoo Cor  | 7)<br>ification)  |
| For further information concerning   | g this matter, please call:                                     |  |   |
| Tennit<br>Name o   | of Contact Person   | at ( <u>670</u> ) <u>34</u><br>Area Code Day                     | 9-5359<br>rtime Telephone Number  |
| MAILING ADDRESS:<br>Division of Corporations<br>Registration Section<br>P.O. Box 6327<br>Tallahassee, FL 32314 |   | Division<br>Registrat<br>Clifton B<br>2661 Exe                   | r ADDRESS: of Corporations ion Section duilding recutive Center Circle see, FL 32301  |
| Enclosed is a check for the follow \$125.00 Filing Fee   | ving amount: ☐ \$130.00 Filing Fee & Certificate of Status      | □ \$155.00 Filing Fee &<br>Certified Copy                        | ☐ \$160,00 Filing Fee. Certificate of Status & Certified Copy                         |

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

| COMPANYTOTRANSACTBUSINE  | 8 INTHE SEGTEOF FLORIDA:<br>-{-ka_/\dagger} \landscape \la | #EFOLLOWING ISSO Limited Liability Company  |  | FR A FOREKTY TIMITED IJABILITY                              |
|--|---|---|--|---|
| (If name unavailable, enter alternate name add 2. (Jurisdiction under the law of which fore  | pted for the purpose of transacting business<br>righ limited liability company is organized)  |   | e must include "Limited Liah                                     | · ·   |
| 4  | Date tirst transacted business in Florida, if price sections 605 0904 & 605 0905, F.S. to d   | nor to registration )   |  |   |
| 5. FOR LANGE Address of Principal  | ee sections 605 044 % 605 0405, 7 5, 16 d   | 6. <b>2</b>   | (Stading Addre   | 19312 138 AR O  |
| 7. Name and street address of F  | lorida registered agent: (P.O.  | Box <u>NOT</u> acceptab   | le)  | R30 PH 2: R30 PH 2: NOF CORPORING AHASSEE, PINA             |
| Name:  | NA Jucal  | 12001   |  | 题 72 ED   |
| Office Address: وياكر  | 120 Black Olive   | Blvd  |  | ာ် ယ  |
| Registered agent's acceptance Having been named as register designated in this application, to comply with the provisions of and accept the obligations of m.  8. The name, title or capacity a Title or Capacity: | ed agent and to accept service<br>Thereby accept the appointme<br>Call statutes relative to the pro<br>y.position as registered agent.<br>(Registered ag  | of process for the a<br>nt as registered age,<br>oper and complete p<br>cent's signature) | nt and agree to act i<br>erformance of my d<br>to manage is/are: | n this capacity. I further agree                            |
| (Use attachments if necessary)   |   |   |  |   |
| 9. Attached is a certificate of exigurisdiction under the law of whi of the translator must be submitted. This document is executed in submitted in a document to the Day.   | ch it is organized. (If the certited) accordance with section 605.0   | icate is in a foreign l<br>0203 (1) (b). Florida  | anguage, a translations  | on of the certificate under oath that any false information |
|  | Night   | ature of an authorized person   |  |   |

Typed or printed name of signee

. . . . .

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JENNIFER ON THE AVENUE, LLC' IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF JANUARY, A.D. 2018.

4655190 8300

SR# 20180559057

You may verify this certificate online at corp.delaware.gov/autiver.shtml

Au :hentication: 202054497

Date: 01-29-18