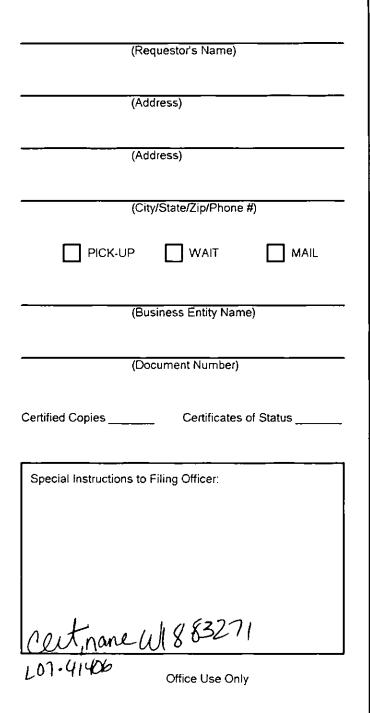
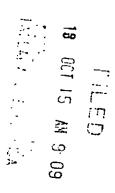
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2018

JESSICA RUE 1655 E HWY 50, STE 203 CLERMONT, FL 34711

SUBJECT: JPT HOLDINGS, LLC Ref. Number: W18000083271

We have received your document for JPT HOLDINGS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L07000041406.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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

Octavia L Simmons Regulatory Specialist III

Letter Number: 318A00019367

www.sunbiz.org

2010 OCT 15 AH 9: 57

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	JPT HOLDING, LLC
SUBJ	Name of Limited Liability Company
	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please	turn all correspondence concerning this matter to the following:
	JESSICA RUE
	Name of Person
	KABA CONSULTING INC
	Firm/Company
	1655 E HWY 50 STE 203
	Address
	CLERMONT, FL 34711
	City/State and Zip Code
	JESSICA@KABACONSULTING.COM
	E-mail address: (to be used for future annual report notification)
For fu	er information concerning this matter, please call:
	JESSICA RUE 352 432-1762
	Name of Contact Person at () 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
Enclos	is a check for the following amount: \$\Boxed{\text{\text{\text{\text{\text{\text{Certificate}}}}}} = \text{\tex{\tex

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

IN COMPILANCE WITH SECTION 095.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED IJABILITY COMPANY TOTRANNACT BUSINESS IN THE STATE OF FLORIDA:

	Limited Liability Company; must include "Limi	ited Liability Company," "L.L.C.," or "LLC.")	
JPT Holding G			
	name adopted for the purpose of transacting business in E	Torida. The alternate name must include "Limited Liability	Company," "L.L.C," or "LLC.")
DELAWARE Christian make the law of w	high foreign limited liability company is organized)	3. 46-4281611 [FEI number, if	aonbeable)
(Savalence Index the Law to	men to cygn mines mounty eximplify ty meninter	1	, in the second of the second
	(Date first transacted business in Florida, if prior	to registration.)	_
6004 00UNTY DO	(See sections 605 0904 & 605 0905, F.S. to deter	rmine penalty liability)	. 6
6024 COUNTY ROA	Principal Officer	6. 6024 COUNTY ROAD 561 (Mailing Address)	
CLERMONT. FL 347	711	CLERMONT, FL 34711	
			- 5 17
			至少
Name and street addre	88 of Florida registered agent: (P.O. Bo	ox NOT acceptable)	ب
Name:	KABA CONSULTING, INC.		09
(NOT - 1 1 to	1655 E HWY 50 STE 203		Y
Office Address:			
	CLERMONT	Florida 34711 (Zip code)	
egistered agent's accer	•	(z.ip code)	
	and the second s	as registered agent and agree to act in the er and complete performance of my dute and \(\sum_{\empty} \)	
		er and complete performance of my dut	
nd accept the obligation	s of my position as registered agent. Al onso Try (Registered agent	er and complete performance of my dut	
nd accept the obligation	and the second s	er and complete performance of my duty /// C. (A signature) has/have authority to manage is/are;	
id accept the obligation . The name, title or cap	acity and address of the person(s) who Name and Address:	er and complete performance of my dut /// C. (A signature) has/have authority to manage is/are;	ies, and I am familiar w
The name, title or cap	(Registered agent) acity and address of the person(s) who	er and complete performance of my duty \(\sigma\) \(\cdot\) \(ies, and I am familiar w
The name, title or cap	(Registered agent) active and address of the person(s) who Name and Address: JUSTIN TIRRI	er and complete performance of my duty \(\sigma\) \(\cdot\) \(ies, and I am familiar w
The name, title or cap	Registered agent. (Registered agent agent) active and address of the person(s) who Name and Address: JUSTIN TIRRI	er and complete performance of my duty \(\sigma\) \(\cdot\) \(ies, and I am familiar w
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The name, title or cap	Registered agent. (Registered agent agent) active and address of the person(s) who Name and Address: JUSTIN TIRRI	er and complete performance of my duty \(\sigma\) \(\cdot\) \(ies, and I am familiar w
nd accept the obligation The name, title or cap <u>Title or Capacity:</u> MBR	acity and address of the person(s) who Name and Address: JUSTIN TIRRI LEQU CONTY (2015)	er and complete performance of my duty \(\sigma\) \(\cdot\) \(ies, and I am familiar w
The name, title or cap Title or Capacity: MBR	acity and address of the person(s) who Name and Address: JUSTIN TIRRI LECTY COUNTY (LA SU	has/have authority to manage is/are: Title or Capacity:	Name and Address:
The name, title or cap Title or Capacity: MBR Use attachments if necessitation under the law	Registered agent acity and address of the person(s) who Name and Address: JUSTIN TIRRI LECAL COUNTY (LA SU CERTIFICAL STILL) SSARY) To of existence, no more than 90 days old of which it is organized. (If the certific	er and complete performance of my duty \(\sigma\) \(\cdot\) \(Name and Address:
The name, title or cap Title or Capacity: MBR Use attachments if necessarisdiction under the law	Registered agent acity and address of the person(s) who Name and Address: JUSTIN TIRRI LECAL COUNTY (LA SU CERTIFICAL STILL) SSARY) To of existence, no more than 90 days old of which it is organized. (If the certific	has/have authority to manage is/are: Title or Capacity: Standard of my duther to the control of my duther to the	Name and Address:
The name, title or cap Title or Capacity: MBR Use attachments if neces Attached is a certificate risdiction under the law of the translator must be seen. This document is executed.	Registered agent acity and address of the person(s) who Name and Address: JUSTIN TIRRI LC24 Coonty Rd Sta Chemiont, FL 34711 ssary) e of existence, no more than 90 days old of which it is organized. (If the certific submitted) cuted in accordance with section 605.02	A duly authenticated by the official having rate is in a foreign language, a translation (93 (1) (b)). Florida Statutes, I am aware the	Same and Address: g custody of records in to of the certificate under onat any false information
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The name, title or cap Title or Capacity: MBR Use attachments if neces Attached is a certificate risdiction under the law of the translator must be seen. This document is executed.	Registered agent. (Registered agent. (Regist	has/have authority to manage is/are: Title or Capacity: 3. duly authenticated by the official having rate is in a foreign language, a translation third degree felony as provided for in s.8	Same and Address: g custody of records in to of the certificate under one and any false information

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JPT HOLDING, 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 FOURTH DAY OF OCTOBER, A.D. 2018.

Authentication: 203547227

Date: 10-04-18