

M1800009461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

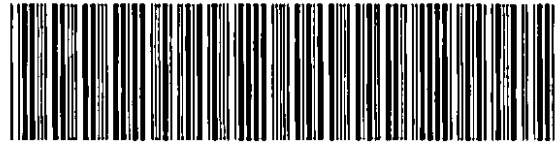
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18 OCT 17 AM 10:36

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2018 OCT 15 AM 10:21

*[Handwritten signature]*  
10/22/18

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: J Squared Contractors, 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:

Jodi Funke

Name of Person

J Squared Contractors, LLC

Firm/Company

4530 Elmwood Rd

Address

Batavia, OH 45103

City/State and Zip Code

Jodi@J2Contractors.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jodi Funke

513 at ( )

256-6208

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:

\$125.00 Filing Fee

\$130.00 Filing Fee & Certificate of Status

\$155.00 Filing Fee & Certified Copy

\$160.00 Filing Fee, Certificate of Status & 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. J Squared Contractors, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")

2. Ohio 3. 83-1190976  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)


5. 4530 Elmwood Rd 6. 4530 Elmwood Rd  
(Street Address of Principal Office) (Mailing Address)  
Batavia, OH 45103 Batavia, OH 45103

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Aidan McConville  
 Office Address: 7929 NE 1st Avenue  
Miami, Florida 33138  
(City) (Zip code)

18 OCT 17 AM 10:37  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

**Registered agent's acceptance:**  
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

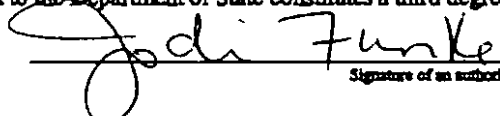
  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:			
<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Owner</u>	<u>Jill Ransbottom</u> <u>4530 Elmwood Rd</u> <u>Batavia OH 45103</u>	_____	_____
<u>Owner</u>	<u>Jodi Funke</u> <u>10226 Waterford</u> <u>Covington, KY 4</u>	_____	_____

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

  
Signature of an authorized person  
Jodi Funke  
Typed or printed name of signer

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show J SQUARED CONTRACTORS, LLC, an Ohio For Profit Limited Liability Company, Registration Number 4208266, was organized within the State of Ohio on July 12, 2018, is currently in FULL FORCE AND EFFECT upon the records of this office.*



*Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 4th day of October, A.D. 2018.*

*Jon Husted*

Ohio Secretary of State

Validation Number: 201827702782