M18006610479

(Req	uestor's Name)	
(Add	ress)	
·	·	
(Add	ress)	
(City	/State/Zip/Phon	e #)
_		_
PICK-UP	MAIT	MAIL
/Rue	iness Entity Nar	
(DUS	mess Entity Nat	ne)
(Doc	ument Number)	ł
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
		:

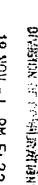
Office Use Only



800320301008

11/01/18--01027--017 **160.00

18 NOV -1 PM 5: 32



COVER LETTER

Registration Section
Division of Corporations

TO:

		Name of	Limited Liability	Company		
nclosed "/ ence, and	Application by Fo	reign Limited Liability Com ed to register the above refer	pany for Authoriza renced foreign limi	ation to Tr ted liabilit	ansact Business in Florida," C y company to transact busines	Certifica ss in Flo
return al	l correspondence	concerning this matter to the	following:			
	Gwendolyn Jo	hnson				
			lame of Person			
	G & J Propert	y Management & Investmen	t LLC			
		F	irm/Company	-		
	504 N.W. 54th	Street				
	 		Address			
	Miami, FL 33	127				
		City/5	State and Zip Code	!		
	gjohn2101@aol	.com				
		E-mail address: (to be use	d for future annua	l report no	tification)	
rther info	rmation concerni	ng this matter, please call:				
Gwen	dolyn Johnson		305 at (785-56	668	
-	Name	of Contact Person	Area Code	Day	ytime Telephone Number	
Division Registr P.O. B	ING ADDRESS on of Corporation ration Section lox 6327 assee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations cion Section Building ecutive Center Circle see, FL 32301	
	heck for the follow 5.00 Filing Fee	wing amount: \$130.00 Filing Fee & Certificate of Status	S155.00 Filin	_	☐ \$160.00 Filing Fee, Cert 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:

				Liability Company," "L.I	
Delaware		3	Applied for		
(Jurisdiction under the law of w	hich foreign limited liability company is organiz	red)	(FEI n	umber, if applicable)	
	(Date first transacted business in Florida, (See sections 605.0904 & 605.0905, F.S.	, if prior to registration.) , to determine penalty liabil	ty)		
504 N.W. 54th Street		6 50	4 N.W. 54th Street		
(Street Address of	rincipal Office)		(Mailing /	Address)	
Miami, FL 33127		<u>Mı</u>	ami, FL 33127	 -	
·	ss of Florida registered agent: (P. Arnold Straus Jr.	.O. Box <u>NOT</u> acce	ptable)		2025년 18 1
Name:					AON
Office Address:	10081 Pines Blvd., Suite C	·	<u> </u>		1
Office Address.					
Office Address.	Pembroke Pines		Florida 33024		
gistered agent's accep ving been named as re ignated in this applica comply with the provisi	(City)	tment as registered proper and compl	the above stated limit agent and agree to a	et in this capacit	y. Iderther
gistered agent's accep ving been named as re signated in this applica comply with the provisi	tance: gistered agent and to accept servition, I hereby accept the appointions of all statutes relative to the soft my position as registered age	tment as registered proper and compl	(Zip the above stated limit agent and agree to a	ted liability comp act in this capacit	any at the p
gistered agent's accepving been named as reignated in this applica comply with the provision accept the obligation.	(City) tance: gistered agent and to accept servition, I hereby accept the appointions of all statutes relative to the soft my position as registered agent (Registered)	tment as registered proper and compleent. ed agent/s signature)	the above stated limit agent and agree to a ete performance of m	ted liability comp oct in this capacit by duties, and I a	any at the p
gistered agent's accepving been named as reignated in this applica comply with the provision accept the obligation.	tance: gistered agent and to accept servition, I hereby accept the appointions of all statutes relative to the soft my position as registered age	tment as registered proper and compleent. ed agent's signature) who has/have auth	the above stated limit agent and agree to a ete performance of m	ted liability comp oct in this capacit by duties, and I a	any at the fil y. I further m familiar h
gistered agent's accepving been named as re ignated in this applica comply with the provisid accept the obligation. The name, title or capa	tance: gistered agent and to accept services, I hereby accept the appoint ions of all statutes relative to the soft my position as registered agent (Register acity and address of the person(s) Name and Address:	tment as registered proper and compleent. ed agent's signature) who has/have auth	the above stated limit agent and agree to a ete performance of m	ted liability comp ect in this capacit by duties, and I a	any at the fil y. I further m familiar h
gistered agent's acceptiving been named as resignated in this applicationally with the provised accept the obligation. The name, title or capacity:	tance: rgistered agent and to accept servition, I hereby accept the appointions of all statutes relative to the soft my position as registered agent (Register acity and address of the person(s)	tment as registered proper and compleent. ed agent's signature) who has/have auth	the above stated limit agent and agree to a ete performance of m	ted liability comp ect in this capacit by duties, and I a	any at the fil y. I further m familiar h
gistered agent's accepting been named as resignated in this applicationally with the provised accept the obligation. The name, title or capacity:	tance: rgistered agent and to accept servition, I hereby accept the appointions of all statutes relative to the soft position as registered agent and address of the person(s) Name and Address: Gwendolyn Johnson 504 N.W.54th St	tment as registered proper and compleent. ed agent's signature) who has/have auth	the above stated limit agent and agree to a ete performance of m	ted liability comp ect in this capacit by duties, and I a	any at the fil y. I further m familiar h
gistered agent's accepting been named as resignated in this application of accept the obligation. The name, title or capting or Capacity:	tance: rgistered agent and to accept servition, I hereby accept the appointions of all statutes relative to the soft position as registered agent and address of the person(s) Name and Address: Gwendolyn Johnson 504 N.W.54th St	tment as registered proper and compleent. ed agent's signature) who has/have auth	the above stated limit agent and agree to a ete performance of m	ted liability comp ect in this capacit by duties, and I a	any at the fil y. I further m familiar h
gistered agent's accepting been named as resignated in this application accept the obligation. The name, title or capting a Capacity:	tance: rgistered agent and to accept servition, I hereby accept the appointions of all statutes relative to the soft position as registered agent and address of the person(s) Name and Address: Gwendolyn Johnson 504 N.W.54th St	tment as registered proper and compleent. ed agent's signature) who has/have auth	the above stated limit agent and agree to a ete performance of m	ted liability comp ect in this capacit by duties, and I a	any at the fil y. I further m familiar h

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "G & J PROPERTY MANAGEMENT & INVESTMENT

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 THIRTIETH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "G & J PROPERTY

MANAGEMENT & INVESTMENT LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF

OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203710454

Date: 10-30-18

7076200 8300 SR# 20187370551