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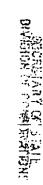
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COVER LETTER

TO:

Registration Section
Division of Corporations

AT BITTO BET ATTOM	roperty Masters LLC		
		Limited Liability Company	
The enclosed "Applica Existence, and check a	ntion by Foreign Limited Liability Compare submitted to register the above refere	any for Authorization to Trans need foreign limited liability c	sact Business in Florida," Certificate of ompany to transact business in Florida.
Please return all corres	spondence concerning this matter to the	following:	
Gwe	endolyn Johnson		
	Na	ime of Person	
G &	J Property Masters LLC		
	Fir	rm/Company	·
. 504	N.W. 54th Street		
		Address	
Mia	mí, FL 33127		
	City/St	ate and Zip Code	
gjohn	2101@aol.com		
	E-mail address: (to be used	for future annual report notific	cation)
For further information	n concerning this matter, please call:		
Gwendolyn J	ohnson	305 785-5668 at ()	
	Name of Contact Person	Area Code Daytin	ne Telephone Number
MAILING A Division of C Registration S P.O. Box 632 Tallahassee, I	orporations Section 7	Registration Clifton Buil	Corporations n Section Iding tive Center Circle
Enclosed is a check for ☐ \$125.00 Fi	r the following amount: iling Fee \$\Bigsim \\$130.00 Filing Fee & Certificate of Status		☐ \$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:

(If name unavailable, enter alternate i	name adopted for the purpose of transacting business in	n Florada. The alternate name must include "Limited Li-	ability Company," "L.L.C," or "LLC,")
2 Delaware		3 83, 2 35	5214
(Jurisdiction under the law of w	thich foreign limited liability company is organized)	(FEI nun	ber, if applicable)
4.			
	(Date first transacted business in Florida, if prio (See sections 605,0904 & 605,0905, F.S. to det	or to registration.) termine penalty liability)	
5. 504 N.W. 54th Street		6. 504 N.W. 54th Street	
(Street Address of Miami, FL 33127	Principal Office)	(Mailing Add Miami, FL 33127	ress)
Wildin, F. E. 33727		Whatti, FL 33127	
7. Name and street addre	ss of Florida registered agent: (P.O. E	Box NOT acceptable)	& >
Name:	Arnold Straus Jr.		VO 100
Office Address:	10081 Pines Blvd., Suite C		1 2 3 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Pembroke Pines	, Florida 33024	
**	(City)	(Zip co	
Registered agent's accep		of process for the above stated limited	
	s of my position, as registered agent.	~ \	
	(Registered as	On 's signature)	
	(Required abo	•	
	(MUUC)	•	Name and Address:
8. The name, title or capa	acity and address of the person(s) who	has/have authority to manage is/are:	Name and Address:
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who Name and Address: Gwendolyn Johnson 504 N.W.54th St	has/have authority to manage is/are:	Name and Address:
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who Name and Address: Gwendolyn Johnson	has/have authority to manage is/are:	Name and Address:
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who Name and Address: Gwendolyn Johnson 504 N.W.54th St	has/have authority to manage is/are:	Name and Address:
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who Name and Address: Gwendolyn Johnson 504 N.W.54th St	has/have authority to manage is/are:	Name and Address:
8. The name, title or cap: Title or Capacity: MGR	acity and address of the person(s) who Name and Address: Gwendolyn Johnson 504 N.W.54th St Miami, FL 33127	has/have authority to manage is/are:	Name and Address:
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who Name and Address: Gwendolyn Johnson 504 N.W.54th St Miami, FL 33127	has/have authority to manage is/are:	Name and Address:
8. The name, title or cape Title or Capacity: MGR (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law	acity and address of the person(s) who Name and Address: Gwendolyn Johnson 504 N.W.54th St Miami, FL 33127 ssary) e of existence, no more than 90 days of of which it is organized. (If the certification of the control of the certification of the certificat	has/have authority to manage is/are:	aving custody of records in the
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8. The name, title or cape Title or Capacity: MGR (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law of the translator must be s) 10. This document is executed.	acity and address of the person(s) who Name and Address: Gwendolyn Johnson 504 N.W.54th St Miami, FL 33127 ssary) c of existence, no more than 90 days of of which it is organized. (If the certifiubmitted) cuted in accordance with section 605.00	has/have authority to manage is/are: Title or Capacity: Line of Capacity: Id, duly authenticated by the official has	aving custody of records in the tion of the certificate under oath
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8. The name, title or cape Title or Capacity: MGR (Use attachments if neces) 9. Attached is a certificate jurisdiction under the law of the translator must be s) 10. This document is executed.	acity and address of the person(s) who Name and Address: Gwendolyn Johnson 504 N.W.54th St Miami, FL 33127 ssary) of existence, no more than 90 days of of which it is organized. (If the certifiubmitted) outed in accordance with section 605.00 of the Department of State constitutes a	has/have authority to manage is/are: Title or Capacity: Id, duly authenticated by the official hacate is in a foreign language, a translated to the cate is in a foreign language, a translated to the cate is in a foreign language, a translated to the cate is in a foreign language, a translated to the cate is in a foreign language, a translated to the cate is in a foreign language, a translated to the cate is in a foreign language.	aving custody of records in the tion of the certificate under oath

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 MASTERS 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 OCTOBER, A.D. 2018.

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

MASTERS 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: 203702314

Date: 10-29-18

7076211 8300 SR# 20187370494