M19000	00 1145
(Requestor's Name) (Address)	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	700324145297 SECTED VIAN SECTED AN SECTED AND STATE
(Document Number) Certified Copies Certificates of Status	01/31/1901012007 **125.04
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		co	VER LETTER			
TO:	Registration Section Division of Corporation	ons				
SUBJE	TRG Leasing LLC					
		Name of	Limited Liability	Company	<u> </u>	
					ransact Business in Florida," (ty company to transact busine	
Please r	return all correspondence	concerning this matter to the	e following:			
	Jamal Jackson	ı				
		N	ame of Person	·		Ì
	Jackson Corpo	pratte Law, P.C.				
		F	irm/Company			
	190 S. La Sall	e St. Suite 430				
			Address			
Chicago, IL 60603						
		City/S	State and Zip Code			
	JJackson@Jacks	sonCorporateLaw.com				
		E-mail address: (to be use	d for future annual	report no	tification)	
For furtl	her information concernit	ng this matter, please call:				
	Jamal Jackson		312 at (433-99	78	
	Name	of Contact Person	Area Code	Day	ytime Telephone Number	
	MAILINC ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton E 2661 Exe	T ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301	
Enclosed	d is a check for the follow \$\$125.00 Filing Fee	ving amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	□ \$160.00 Filing Fee, Cent of Status & Centified Copy	

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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;

	Leasing,	

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Nevada		3.	46-4141680	1	
(Jurisdiction under the law of which foreign limited liability company is organized)			(FE) number, if a	rr, if applicable)	
n/a					
· · · · · · · · · · · · · · · · · · ·	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ			-	
3361 Rouse Road #14)	6.	3361 Rouse Road #140		
(Street Address of	Principal Office)		(Mailing Address)		1
Orlando, FL 32817			Orlando, FL 32817		1
			· · · ·	A C	
· · ·	······································		<u> </u>	<u> </u>	¦즙
				22	Se la
Name and street address	is of Florida registered agent: (P.O. Box	N <u>OT</u> a	(cceptable)	5-	∣ z
Name:	Rashod Johnson			SSISS	$\frac{\omega}{\omega}$
Office Address:	3361 Rouse Road #140	·			
	Orlando		, Florida <u>32817</u>		ç;
	(Cuy)	-	(Zip code)	- 87	-

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.

KMK	٨
(Registered agent's s	ignature)

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>	Name and Address:	<u>Title or Capacity;</u>	Name and Address:
MNGR	Rashod Johnson		
	3361 Rouse Road #140 Orlando, FL 32817		

(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.

RMKH	
•	Signature of an authorized person

Rashod Johnson, Manager

Typed or printed name of signee



License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which by law <u>cannot</u> be waived.
