

**m19000001475**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : LICENSES ETC INC  
Account Number : 120070000159  
Phone : (239)777-1028  
Fax Number : (877)275-3593

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: Support@licensesetc.com

**Foreign Limited Liability Company  
JNJ MARINE, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$160.00

Now 7 pages

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2019 FEB 11 AM 8:12  
DIVISION OF STATE  
LICENSING FLORIDA

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1/1

850-617-6381

2/8/2019 10:32:00 AM PAGE 1/001 Fax Server

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February 8, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LICENSES ETC INC

SUBJECT: JNJ MARINE, LLC  
REF: W19000012655

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Valerie Herring  
Regulatory Specialist III

FAX Aud. #: H19000044547  
Letter Number: 419A00002753

P.O BOX 6327 - Tallahassee, Florida 32314

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JNJ MARINE, 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:

LISA ADAMS

Name of Person

LICENSES, ETC., INC.

Firm/Company

886 110TH AVENUE SUITE 6

Address

NAPLES, FL 34108

City/State and Zip Code

SUPPORT@LICENSESETC.COM

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

For further information concerning this matter, please call:

LISA ADAMS

239

777-1028

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**



\$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

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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:*

1. JNJ MARINE, LLC

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

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

TEXAS

83-3354789

2. (Jurisdiction under the law of which foreign limited liability company is organized)

3. (EIT number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0901 & 605.0903, F.S. to determine penalty liability)

1020 NE LOOP 410, SUITE 700

1020 NE LOOP 410, SUITE 700

5. (Street Address of Principal Office)

6. (Mailing Address)

SAN ANTONIO, TX 78209

SAN ANTONIO, TX 78209

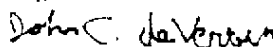
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: JOHN DEVERTEUIL

Office Address: 1110 RICHARDSON RD.

TALLAHASSEE, Florida 32301  
(City) (Zip code)**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)

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TALLAHASSEE, FLORIDA  
STATE

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

**Title or Capacity:** **Name and Address:**

☐ Manager Name: JAMES BROWN

☐ Member Address: 14330 CLEAR CREEK

☐ Authorized SAN ANTONIO, TX 78232

Person \_\_\_\_\_

☒ Other AMBR ☐ Other \_\_\_\_\_

☐ Manager Name: JOHN DEVERTEUL

☐ Member Address: 1025 SKEENAH GAP RD.

☐ Authorized SUCHES, GA 30572

Person \_\_\_\_\_

☒ Other AMBR ☐ Other \_\_\_\_\_

☐ Manager Name: NELSON CORBIN

☐ Member Address: 2377 DAVIS BRIDGE RD.

☐ Authorized PARKTON, NC 28371

Person \_\_\_\_\_

☒ Other AMBR ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Nelson Corbin  
Signature of an authorized person

NELSON CORBIN  
Typed or printed name of signer

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Corporations Section  
P.O.Box 13697  
Austin, Texas 78711-3697



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David Whitley  
Secretary of State

## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for JNJ Marine, LLC (file number 803186231), a Domestic Limited Liability Company (LLC), was filed in this office on December 10, 2018.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 08, 2019.

A handwritten signature in black ink, appearing to read "David Whitley".

David Whitley  
Secretary of State

FILED  
2019 FEB 11 AM 8:03  
STATE OF TEXAS  
CLERK OF THE SECRETARY OF STATE

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