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TO:

Registration Section

Division of Corporations		
SUBJECT: TR 6	Name of Limited Liability Company	
	Liability Company for Authorization to Transact Business in Florida," Certifue above referenced foreign limited liability company to transact business in	
Please return all correspondence concerning this	matter to the following:	
<u>Dunia</u> f	A lorez Name of Person	
Dw Taxes an	A Financial Services Firm/Company	
1725 Carpon	ter Fletcher Rd Ste 103	
Durham	NC 27713 City/State and Zip Code	
dufinancia	Service @ 6mail. Com Eggsss: (to be used for future annual report notification)	5
E-mail address	그리 그	
Dunia Lope 2 Name of Contact Person	at (919) 641-1348 75 3	
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	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1
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The 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," or
2. NOYTH COSO : (Self number, if applicable) 3. (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. 1725 Carpenter Fletcher Rd 6. 103 Vashon Ct (Street Address of Principal Othice) (Mailing Address)
Ste 103 Dulham <u>Cary NC 27513</u>
NC 77713
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: Gonzalo Gomez Solovza
Office Address: 16437 Nelsun Park Dr Unit 203
Clermant Florida 34714.
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.
Great four Solaire.

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: **Title or Capacity:** Name and Address: Name and Address: Name: Gónzalo Solo125 Manager Manager Address: 16437 NOLSON POIL dr Member ☐ Member Address: apt 203 (lument F) Authorized Authorized 34714 Person Person Other Other Other Other Name: 1)UNIA A 100eZ Manager Manager | Address: 1775 Carpenter Flitchir Member Member Authorized Authorized Person Person Other_ Other____ Other___ Manager ☐ Manager Address: 103 Vashon ct Member Member Authorized Authorized Person Person Other____ Other Other____ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Signature of an authorized person



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

JRG, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 12th day of August, 2016

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 12th day of June, 2019.

Elaine I. Marshall

Secretary of State