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(Reque	stor's Name)					
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PICK-UP	WAIT	MAIL				
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(Document Number)						
Certified Copies	Certificates of	Status				
Special Instructions to Filing Officer:						
W19-92575	name N	UA.				

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COVER LETTER

TO:		ation Section n of Corporation	s				
SUBJE		REAL ESTATE I	HOLDINGS, LLC				
		Name of Limited Liability Company					
The encl Existence	losed "A e, and cl	pplication by Fore neck are submitted	ign Limited Liability Comp to register the above refere	eany for Authoriz suced foreign lim	ation to Transact Business in Florida," Certificate of ited liability company to transact business in Florida.		
Please re	eturn all	correspondence co	oncerning this matter to the	following:			
		LeAnn Austin					
			Na	ume of Person			
	Registered Agents Legal Services, LLC						
		Firm/Company					
		1013 Centre Rd.	Suite 403S				
		Address					
		Wilmington, DE	19805				
			City/St	ate and Zip Code	:		
	2	ore@comcast.net					
	_		E-mail address: (to be used	for future annua	report notification)		
For further information concerning this matter, please call:							
LeAnn Austin		800 at (400-6650				
		Name of	Contact Person	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				
1	Pl case m		following amount: to: FLORIDA DEPART! S130.00 Filing Fee & Certificate of Stan	\$155.00			



October 17, 2019

LEANN AUSTIN 1013 CENTRE RD, SUITE 4035 WILMINGTON, DE 19805

SUBJECT: JK REAL ESTATE HOLDINGS, LLC

Ref. Number: W19000092575

We have received your document for JK REAL ESTATE HOLDINGS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer 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) 245-6051.

Stacy Prather Regulatory Specialist III

www.sunbiz.org

DO DOMAGOS MILL DI LL GOO

Letter Number: 619A00021517

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. JK REAL ESTATE H						
	n Limited Liability Company; must include "Limite		mpany," "L.L.C.," or "LLC.")			
X JK REAL E	- STATE HOLD: NGS MD, LI	<u> </u>				
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Fk	orida. The alterna				
Maryland 2		45	45-2909072 3. (FEI number, of applicable)			
(Jurisdiction under the law of s	which foreign limited liability company is organized)	· ·	(FEI number	if applicable)		
N/A 4						
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.) ine penalty habili	iy)	_		
3216 Ina Chase 5.		872	8 Bayside Rd.			
(Street Address of	Principal Office)	o. <u> </u>	(Mailing Address	3)		
Chesapeake Beach, MD 20732		Chesapeake Beach. MD 20732				
		_		22		
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT accep	otabie)	ELECTION AND AND AND AND AND AND AND AND AND AN		
Name:	Registered Agents Legal Services, LLC	<u> </u>	_			
Office Address:	155 Office Plaza Drive, Suite A		_			
	Tallahassee		32301 . Florida			
	(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)

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: Title or Capacity: Name and Address: Name: _____Krahling Manager Manager Manager Name: Address: 3216 Ina Chase Address: ☐ Member Member | Chesapeake Beach, MD 20732 Authorized Authorized Person Person Other Other____ Other ___ ___ Other Manager Manager Manager Member Address: ☐Member Address: _____ Authorized Authorized Person Person Other Other___ Other_ Manager Name: Manager Name: Member Address: _____ Member Address: 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. į

Typed or printed name of signee

Jeffrey Krahling

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND. DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT JK REAL ESTATE HOLDINGS, LLC (W14230999), REGISTERED JULY 27, 2011, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS SEPTEMBER 25, 2019.

Michael L. Higgs

Director



301 West Preston Street, Baltimore. Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

> Online Certificate Authentication Code: DVbEFuKY5U6GxW1VmApoA To verify the Authentication Code, visit http://dat.maryland.gov/verify