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Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

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

Email Address: chris.norton@drinkcoffee.com

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**Foreign Limited Liability Company
JJJM ASSOCIATES, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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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. JJJM ASSOCIATES, 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.")

2. NEW JERSEY

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

3.

(FEI number, if applicable)

4. N/A

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2 CRANBERRY ROAD, SUITE A2, PARSIPPANY, NJ 07054

(Street Address of Principal Office)

6. 2 CRANBERRY ROAD, SUITE A2, PARSIPPANY, NJ 07054

(Mailing Address)

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

Name: HUBCO REGISTERED AGENT SERVICES, INC.

Office Address: 155 OFFICE PLAZA DRIVE, 1ST FLOOR

TALLAHASSEE

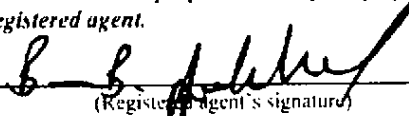
(City)

Florida 32301

(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)

BRUCE B HUBBARD-PRESIDENT, HUBCO REGISTERED AGENT SERVICES, INC.

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

JUDSON KLEINMAN-2 CRANBERRY ROAD, SUITE A2, PARSIPPANY, NJ 07054 (MEMBER)

JESSICA KLEINMAN-2 CRANBERRY ROAD, SUITE A2, PARSIPPANY, NJ 07054 (MEMBER)

JOSH KLEINMAN-2 CRANBERRY ROAD, SUITE A2, PARSIPPANY, NJ 07054 (MEMBER)

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)


Signature of authorized person

This document is executed in accordance with section 605.0902 (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.

JUDSON KLEINMAN

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

JJIM ASSOCIATES, LLC
0400512405

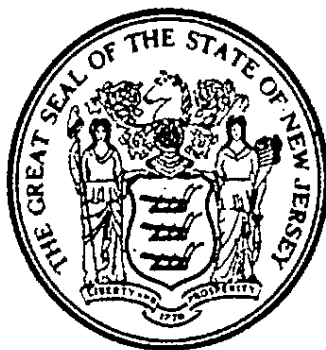
I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on August 16, 2012.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are

JUDSON KLEINMAN
14 WESTGAGE ROAD
LIVINGSTON, NJ 07039

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*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
26th day of November, 2019*

A handwritten signature in black ink, appearing to read "Elizabeth Maher Muoio".

Elizabeth Maher Muoio
State Treasurer

Certificate Number : 6102751973

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp