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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number

: (855)330-1010

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

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Foreign Limited Liability Company J&A Professional Services LLC

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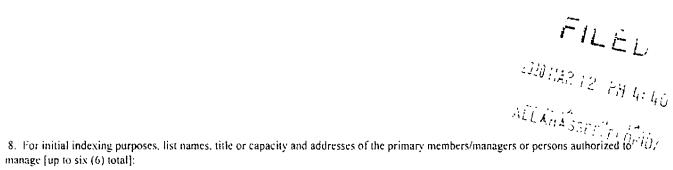
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MAR 1 3 2020

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

name unavailable, enter alternate	name adopted for the purpose of transacting business in Florida. The		"L1,C," or TITC	
Wyoming	hich toxcium firmited leability company is organized)	_{3.} 46-2153897		
Upon Qua		(FEI munber, if applicable)		
	(Date first transacted business in Florida, if prior to registrat (See sections 603,0904 & 603,0905, F.S. to determine penal	ion hy hability		
	St N, STE 300	₆ 7901 4th St N, STE 300		
St. Petersb	urg FL 33702	St. Petersburg FL 3	33702	
Name and street addre	ss of Florida registered agent: (P.O. Box NOT	_ , .	STATE OF THE STATE	
Name:	Registered Agents II	<u>nc.</u>		
Name: Office Address:	Registered Agents II 7901 4th St N STE			

(Registered agent's signature)



manage [up to six (6) total]:

Title or Capacity: ☑Manager ☐Member ☐Authorized Person ☐Other	Name and Address: Name: Alan Hernandez Address: 7901 4th St N STE 300 St. Petersburg, FL 33702	Title or Capacity: Manager Member Authorized Person Other	Name and Address: Name: Address: Other						
☐Manager ☐Member ☐Authorized Person ☐Other	Address:	☐ Manager ☐ Member ☐ Authorized Person ☐ Other	Name:Address:Other						
☐Manager ☐Member ☐Authorized Person ☐Other	Name:	☐ Manager ☐ Member ☐ Authorized Person ☐ Other	Name:Address:						
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.									

Typed or printed name of signee

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

J&A Professional Services LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on January 29, 2020, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number 2020-000897659.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 6th day of March, 2020 at 9:58 AM. This certificate is assigned ID Number 035186428.



Secretary of State

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Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.