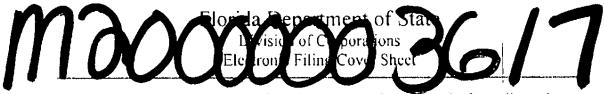
4/9/2020

Division of Corporations



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Foreign Limited Liability Company JEM Headlands LLC

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T. LETMEUX

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS INTHE STATE OF FLORIDA: JEM Headlands LLC (Name of Foreign Limited Liability Company; unist include "Limited Liability Company," "L.L.C.," or "FFC.") (If name may allable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "E.L.C," or "U.C.") (Flit number; if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905; F.S. to determine penalty liability.) 145 Corte Madera Town Center #281 145 Corie Madera Town Center #281 (Street Address of Principal Office) Corte Madera, CA 94925 Corte Madera, CA 94925 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C.T. Corporation System Name: 1200 South Pine Island Road Office Address: Plantation , Florida (City) 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

C.T. Corporation System Scott White, Assistant Secretary

(Registered agent's signature)

and accept the obligations of my position as registered agent.

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	<u>:</u>	Name and Address:
■Manager	Name:	⊒ Manager	Name:	
□Member	Address: 145 Corte Madera Town Center	Member	Address:	
□Authorized	#281	☐ Authorized		· · · · · · · · · · · · · · · · · · ·
Person	Corte Madera, CA 94925	Person		.,
Other	Other	□Other		□Other
☐Manager	Name:	☐ Manager	Name:	
□Member	Address:	☐ Member	Address:	
□Authorized		☐ Authorized		
Person		Person		
□Other	Other	ZOther		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	☐ Member	Address:	
□Authorized		☐ Authorized		
Person		Person		
□Other		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.

/s/ Mark Blumling		
	Signature of an authorized person	
Mark Blumling		
	Typed or printed name of signee	



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JEM HEADLANDS LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE NINTH DAY OF APRIL, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

e at coro delaware gov/authye

Authentication: 202745277

Date: 04-09-20