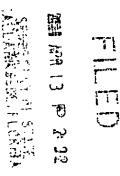
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		of Corporations			•				
	Taij:	ax Properties, LLC					4		
IJE	CT:		-		<u> </u>				
		Na	me of Limited Liability	Company					
enc tenc	losed "Ap	plication by Foreign Limited Liabilit eck are submitted to register the above	y Company for Authori e referenced foreign lin	zation to Tr iited liabili	ransact Business ty company to tr	in Florida," Certifi ansact business in f	cate Iori		
se r	eturn all co	orrespondence concerning this matter	r to the following:						
		Gregory C Poulos							
	•		Name of Person						
		Poulos Law Firm, PLLC							
	-		Firm/Company				ficate o		
		11120 N Tatum Blvd, Suite 101							
					n Florid				
	:	Phoenix, AZ 85028							
	· -		City/State and Zip Code						
	·m	ichael,paradiso@sysazzlo.co m	nichaeth pa	radiz	se@gn	ail com	in Florid		
			be used for future annua						
iurth	ner informa	ation concerning this matter, please c	all:						
	Gregory (C. Poulos	623 at (252-029	92				
		Name of Contact Person	Area Code	Day	time Telephone	Number			
	Mailing A		Street Address:						
	_	tion Section	Registration S						
		of Corporations	Division of Co						
	P.O. Box			The Centre of Tallahassee					
	Tallahas	see, FL 32314	2415 N. Mon		, Suite 810				
			Tallahassee, F	L 32303					
		is a check for the following amount: ke check payable to: FLORIDA DE.	PARTMENT OF STA	Tr					
		0 Filing Fee ☐ \$130.00 Filing Fe	ee & 🔲 \$155.00 Fil			iling Fee, Certificat tus & Certified Cop			

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

<u>-</u>	Limited Lintuisty Company, mess include "Limit					_
म्मार धावश्वक्रिकेटेट, स्वादा क्षीराध्वार (record for the purpose of transacting his lines in	Florida. The all	ernete name mest include "Limited	Limbility Compa	==y,**=1L L, C, = er	TILC ")
Arizona		3.				
Ou odation under the law of w	pro formin prime (shile) company a organized)	J	មួញជា	न्केस, र्व क्ष्म्रहरूस	Ωe1	_
	Des Comments	 				
	(Dath first Extraorded Business at Francis, at prior to (See Section), 405 (NIM & 605 0905, F.S. to deten	mice penalty lis	ibility)			
1417 E Goldenrod St		1417 E Goldenrod St				
cet Address of Prorequi Office)		ν	(Mailing Address)			_
Phoenix, AZ 85048		P	hoenix. AZ 85048			
Name and street addre	sof Florida registered agent: (P.O. Bo Stephen Gaskill	– DX <u>NOT</u> ac	ceptable)		· Dra	-
Name:	2955A Florida Blvd				20	7
Office Address:				44 (\$10.0		res Min
Office Address:	Delray Beach		33483 , Florida	## 원 -		
Office Address:	Delray Beach				ট । বি	

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: Paradise Family Joint Revocable I Michael Paradise Manager □ Manager Address: ____ Address: ___ ☐ Member **■** Member Phoenix, AZ 85048 Phoenix, AZ 85048 **Authorized** ☐ Authorized Person Person Other____ Other Other ☐ Other ______ Meghan Jo Healy Manager 🗏 Name: ☐Manager Address: 1417 E Goldenrod St \square Member ☐Member Address: Phoenix, AZ 85048 ☐ Authorized ☐ Authorized Person Person □Other____ Other □Other____ Other Name: _____ □ Manager Name: ____ ☐Manager Address: _____ □ Member ☐.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.

Typed or printed name of signee

Michael Paradise





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

Taijax Properties, LLC

ACC file number: 23044356

was incorporated under the laws of the State of Arizona on 12/12/2019, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF, I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 03/30/2020

Matthew Neubert, Executive Director



