

ma0000004103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

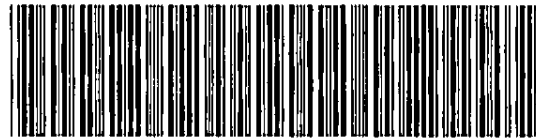
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JACKNEE, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael Einhorn

Name of Person

JACKNEE, LLC

Firm/Company

411 Airybrook Ln.

Address

Houston, TX 77094

City/State and Zip Code

meinhorn2008@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Einhorn

281

250-9696

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY FOR TRANSACTING BUSINESS IN THE STATE OF FLORIDA

JACKNELL, LLC

1. Name of foreign limited liability company must include "Limited Liability Company," "LLC," or "L.L.C."

2. Name of alternate name of company must include "Limited Liability Company," "LLC," or "L.L.C."

FLA 123

3. Name of alternate name of company must include "Limited Liability Company," "LLC," or "L.L.C."

4. Name of alternate name of company must include "Limited Liability Company," "LLC," or "L.L.C."

5. Name of alternate name of company must include "Limited Liability Company," "LLC," or "L.L.C."

441 Anybrook Ln

6.

7. Name of alternate name of company must include "Limited Liability Company," "LLC," or "L.L.C."

Houston, TX 77094

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

Name

Gregory D. Davila

Office Address

1111 12th St., Ste 310

Key West

Florida

33040

(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

FILED
MAR 27 10 30 AM
CLERK OF THE COURT
JACKSONVILLE, FLORIDA

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:

☒ Manager

Name: MICHAEL EINHORN

☒ Member

Address: TRUSTEE

☐ Authorized

411 AIRYBROOK LANE

Person

HOUSTON TX 77094

☐ Other _____

☐ Other _____

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

Title or Capacity:

Name and Address:

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ Other _____

☐ Other _____

☐ Manager

Name: _____

☐ Member

Address: _____

☐ Authorized

Person

☐ 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.

✓ Michael Einhorn

Signature of an authorized person

MICHAEL EINHORN

Typed or printed name of signer

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Ruth R. Hughs
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for JACKNEE, LLC (file number 803471649), a Domestic Limited Liability Company (LLC), was filed in this office on November 14, 2019.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 23, 2020.



A handwritten signature in black ink, appearing to read "Ruth R. Hughs".

Ruth R. Hughs
Secretary of State