M20000006983

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
emailed cert 8/11/20						
110000						
W2000085387						
12821						
U - 0 - 1						

Office Use Only



600348939866

RECEPTED

JUL 2 4 222

07/27/20--01058--027 **160.00

2020 KT 11 PH 1:50

573/13/1

COVER LETTER

Foreign Limited Liability itted to register the above the concerning this matter to sig LC Beach Road Unit 1602 Beach, FL 32413 Ciom	Company for Authorization to Transact Business in Florid referenced foreign limited liability company to transact but to the following: Name of Person Firm/Company Address	a," Certifisiness in
the concerning this matter to sig LC Beach Road Unit 1602 Beach, FL 32413 Ciom	referenced foreign limited liability company to transact but to the following: Name of Person Firm/Company Address	a," Certifi
Ecach Road Unit 1602 Beach, FL 32413 Ciom	Name of Person Firm/Company Address	_
LC Beach Road Unit 1602 Beach, FL 32413 Ci om	Firm/Company Address	_
Beach Road Unit 1602 Beach, FL 32413 Ci om	Firm/Company Address	_
Beach Road Unit 1602 Beach, FL 32413 Ci om	Address	_
Beach, FL 32413 Ci om	Address	_
Beach, FL 32413 Ci om		_
Ci		_
Ci		_
Ci	ity/State and Zip Code	_
om		
E-mail address: (to be	used for future annual report notification)	_
ing this matter, please call	I:	~
	903 918-9580	2020 1.1
of Contact Person	Area Code Daytime Telephone Number	- <i>i</i>
ations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	PH 1:50
1 31 3	tions 14 he following amount:	at (

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: JAH LITE LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") JAH ENTERPRISES 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 "LI.C.") The State of Texas 81-1335904 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 16819 Front Beach Road Unit 1602 5. (Street Address of Principal Office) Panama City Beach, FL 32413 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) James A Hassig Name: 16819 Front Beach Road Unit 1602 Office Address: Panama City Beach 32413

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.

Florida

(Registered agent's signature)

(City)

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:		Name and Address:
Manager	Name:	-	□Manager	Name:	
□Member	Address: 16819 Front Beach Road Unit	160° Z	□Member	Address:	
□Authorized	Panama City Beach, FL 32413		□Authorized		
Person			Person		
□Other	Other		□Other		Other
□Manager	Name:		□Manager	Name:	
□Member	Address:		□Member	Address:	
□Authorized			□Authorized		
Person			Person		
□Other	Other		□Other		□Other
□Manager	Name:		□Manager	Name:	2020
□Member	Address:		□Member		
□Authorized			□Authorized		
Person			Person		
□Other	Other		□Other		Other

<u>Important Notice:</u> 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.

James A Hassig

Typed or printed name of signee

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



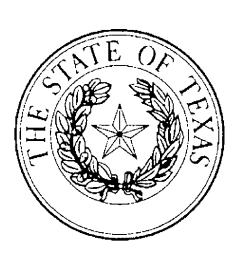
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for JAH LITE, LLC (file number 802382211), a Domestic Limited Liability Company (LLC), was filed in this office on February 01, 2016.

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 August 11, 2020.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Ruth R. Hughs Secretary of State

Dial: 7-1-1 for Relay Services

Document: 988842840003

Fax: (512) 463-5709 TID; 10264