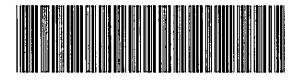
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(Req	uestor's Name)				
(Add	ress)				
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Registration Section

nce, and check are submitted to register the above	Company for Authorization to Transact Business in Florida,"		
n i i i i i i i i i i i i i i i i i i i	referenced foreign limited liability company to transact busing		
return all correspondence concerning this matter t	to the following:		
Paul Frischer			
	Name of Person		
KJB Capital LLC			
	Firm/Company		
7837 Villa D Este Way			
	Address		
Delray Beach, FL 33446			
	City/State and Zip Code		
pf@go-opv.com			
E-mail address: (to b	e used for future annual report notification)		
rther information concerning this matter, please ca	all:		
Paul Frischer	at (203) 609 5101 Area Code Daytime Telephone Number		
Name of Contact Person	Area Code Daytime Telephone Number		
Mailing Address:	Street Address:		
Registration Section	Registration Section		
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		
ranamassee, 115 92517	Tallahassee, FL 32303		
Enclosed is a check for the following amount:	·		

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

KJB Capital LLC	ASINESS IN THE STATE OF FLORIDA: Limited Liability Company; must include "Limited	Liability	Company," "L.L.C.," or "LEC.")	
f name unavailable, enter afternate i	name adopted for the purpose of transacting business in Flo	rida. The a	Iternate name must include "Limited Liability Com-	pany," "L.L.C," or "LLC.")
Connecticut		3.	85-0669736	
(Jurisdiction under the law of w	hich toreign limited liability company is organized)		(FEI number, it applies	able)
December 21 2021				
	(Date first transacted business in Florida, if prior to r (See sections 605,0904 & 605,0905, F.S. to determine	egistration ne penalty) jability)	,
7837 Villa D Este Way	<i>!</i>	6	7837 Villa D Este Way (Mailing Address)	
eet Address of Principal (Office)		0.	(Mailing Address)	
Delray Beach, FL			Delray Beach, FL	•
33446			33446	• •
10440		•		
Name and street address	ss of Florida registered agent: (P.O. Box	<u>NOT</u> a	cceptable)	
Name:	Avros Corporation			
Office Address:	806 Verona Street, Suite I			
	Kissimmee		. Florida <u>34741</u> (Zip code)	
	(City)		(Zip code)	
signated in this applica comply with the provis	otance: egistered agent and to accept service of p tion, I hereby accept the appointment as ions of all statutes relative to the proper ts of my position as registered agent.	registe and co	red agent and agree to act in this conplete performance of my duties, as	apacity. I further a
	(Registered agent's s	ngnature)		

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]: Name and Address: Title or Capacity: Title or Capacity: Name and Address: JUA Holdings, INC Paul Frischer □Manager Name: ■Manager Name: 806 Verona Street, Suite J 35 Putnam Greens Address: Address: ■ Member Greenwich, CT 06830 Kissimmee, FL 34741 □ Authorized □ Authorized Person Person □Other_____ □Other____ □Other = □Other_____ Name: ______ □ Manager □Manager □Member Address: _____ □Member Address: □ Authorized ☐ Authorized Person Person □Other = ' □Other____ □Other____ □Other ШManageг 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. Signature of an authorized person

Typed or printed name of signee

Paul Frischer, Manager

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

KJB CAPITAL LLC

a domestic limited liability company, were filed in this office on July 11, 2019.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: December 16, 2020

Business ID: 1315089 Express Certificate Number: 2020428519002

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov