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H210000652273ABCZ

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Account Number : I20080000045 : (302)645-7400 Phone Fax Number : (302)645-1280

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natalie@njrdevelopment.com Email Address:

Foreign Limited Liability Company NJR Asset Group, LLC

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(((H21000065227 3)))

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:

	aine adopted for the purpose of transacting business in	Total Tite and Title County Tit	onny company. L.C.C. of EEC. 7
Delaware		3. 86-2016136	t, if applicable)
(Jurisdiction under the law of wi	nich foreign limited liability company is organized)	[Fl;(number	r, il applicable
2/11/2021			
	(Date first transacted business in Florida, if prior ((See sections 605 0904 & 605,0905, F.S. to deter	o registration (nine penalty hability)	
460 3rd St. N., Space	A	460 3rd St. N., Space A 6. (Mailing Address)	
cet Address of Procepal Office)		0. (Mailing Address)	
St. Petersburg, FL 337	01	St. Petersburg, FL 33701	o:
			20. 2
			; ,
Name and street address	es of Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)	TE T
Name and street address	es of Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)	TEB 17 PM
Name and street addres	ss of Florida registered agent: (P.O. Bo	nx <u>NOT</u> acceptable)	LANASSELL FLO
Name and street address Name:		nx <u>NOT</u> acceptable)	LANASSET FLORID
Name:		ox <u>NOT</u> acceptable)	LANASSETT LORION
	Natalie Gomez		LANASSETT FLORIDA
Name:	Natalie Gomez 460 3rd St. N., Space A		LANASSET FLORIDA

(((H21000065227 3)))

8. For initial indexing purposes, list names, title or capacity and ac	ddresses 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: Neil Rauenhorst	□Manager	Name:	
≣Member	Address: 460 3rd St. N., Space A	□Member	Address:	
□Authorized	St. Petersburg, FL 33701	□Authorized		
Person		Person		
□Other	Other	Other		□Other:
□Manager	Name:	□Manager	Name:	eg
□Member	Address:	□Member	Address: _	اب ب
□Authorized		□Authorized		<u> </u>
Person		Person		
Other	Other	□Other		Other
∐Manager	Name:	□Manager	Name:	
□Member	Address:	□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. 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.

natilie Doney		
	Signature of an authorized person	
Neil Rauenhorst		
	Typed or printed name of sigree	

(((H21000065227 3)))

Delaware

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "NJR ASSET GROUP, LLC" IS DULY FORMED

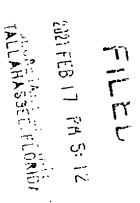
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

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

OF THE ELEVENTH DAY OF FEBRUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NJR ASSET GROUP, LLC" WAS FORMED ON THE FIFTH DAY OF FEBRUARY, A.D. 2021.

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



5002221 8300 SR# 20210421952

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202493902

Date: 02-11-21