

M21000007250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

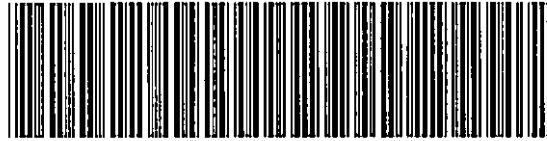
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Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Rec'd  
6-22-21  
Mel Solomon

Office Use Only



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2021 JUN 22 AM 10:37  
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CLERK OF COURT  
JULIA A. HARRIS

FILED

JUN 23 2021

M. SOLOMON

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JP Investment Group 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:

ATTN: Sean Lopez

Name of Person

Lopez Law Group

Firm/Company

360 Central Ave Suite 864

Address

Saint Petersburg, FL 33701

City/State and Zip Code

Sean@thelopezlawgroup.com

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

For further information concerning this matter, please call:

Sean Lopez

727  
at ( )

933-0015

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

2021 JUN 22 AM 10:37  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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:

1. JP Investment Group LLC  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC")

JPoole Investment Group 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 "LLC.")

2. TENNESSEE  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-2855522  
(FEI number, if applicable)

4. 09/28/2019  
(Date first transacted business in Florida (if prior to registration))  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3612 DOVE CREEK RD  
(Street Address of Principal Office)

6. 3612 DOVE CREEK RD  
(Mailing Address)

ANTIOCH, TN 37013-4941

ANTIOCH, TN 37013-4941

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

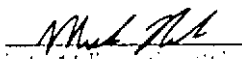
Name: Micah Poole

Office Address: 2450 13th Ave N Unit 206

Saint Petersburg 33713  
(City) Florida (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)

May 7, 2021

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2021 JUN 22 AM 10:37  
CLERK OF CIRCUIT 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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Johnnie Poole</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>3612 Dove Creek RD</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Antioch, TN 37013</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

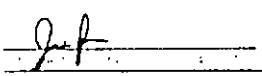
2021 JUN 22 AM 10:37  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

FILED

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.

 May 7, 2021  
 \_\_\_\_\_  
 Signature of an authorized person  
 Johnnie Poole  
 \_\_\_\_\_  
 Typed or printed name of signer



**Tre Hargett**  
Secretary of State

**Division of Business Services**  
**Department of State**

State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

**LOPEZ LAW GROUP**  
STE 864  
360 CENTRAL AVE  
SAINT PETERSBURG, FL 33701-3857

June 22, 2021

**Request Type: Certificate of Existence/Authorization**

Request #: 0423298

Issuance Date: 06/22/2021

Copies Requested: 1

**Document Receipt**

Receipt #: 006455609

Filing Fee: \$20.00

Payment-Check/MO - JOHNNIE POOLE, ST PETERSBURG, FL

\$20.00

**Regarding: JP Investment Group LLC**

Filing Type: Limited Liability Company - Domestic

Formation/Qualification Date: 09/20/2017

Status: Active

Duration Term: Perpetual

Business County: DAVIDSON COUNTY

Control #: 923817

Date Formed: 09/21/2017

Formation Locale: TENNESSEE

Inactive Date:

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**JP Investment Group LLC**

\* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;

\* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

\* has filed the most recent annual report required with this office;

\* has appointed a registered agent and registered office in this State;

\* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

Processed By: Nichole Hambrick

Verification #: 047036223



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 8, 2021

LOPEX LAW GROUP  
ATTN: SEAN LOPEZ  
360 CENTRAL AVE, SUITE 864  
SAINT PETERSBURG, FL 33701

SUBJECT: JP INVESTMENT GROUP LLC  
Ref. Number: W21000083332

We have received your document for JP INVESTMENT GROUP LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon  
Senior Section Administrator

Letter Number: 821A00012548

*Rec'd  
6-18-21*