

M21 00000 10618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

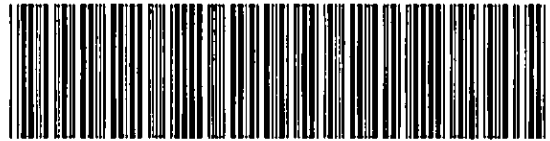
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200373051802

RECEIVED

OCT 04 2021

10/05/21--01005--002 **25.00

FILED

2021 OCT -4 PM 5:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC
Amend.

10/20/21

DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2021

ADON J. SOLOMON
COHEN POLLOCK MERLIN TURNER, P.C.
3350 RIVERWOOD PARKWAY, SUITE 1600
ATLANTA, GA 30339

Qualification documents for JNL SMART REALTY LLC were filed on August 16, 2021, and assigned document number M21000010618. Please refer to this number whenever corresponding with this office.

Your limited liability company is authorized to transact business in Florida as of the file date.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added.

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Apply today with the IRS online at:

<https://sa.www4.irs.gov/modiein/individual/index.jsp>.

Please notify this office if the limited liability company address changes.

Should you have any questions regarding this matter, please contact this office at the address given below.

Mel Solomon
Senior Section Administrator
Registration Section
Division of Corporations

Letter Number: 221A00019589

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JNL Smart Realty LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adon J. Solomon

Name of Person

Cohen Pollock Merlin Turner, P.C.

Firm/Company

3350 Riverwood Parkway, Suite 1600

Address

Atlanta, GA 30339

City/State and Zip Code

asolomon@cpmlaw.com AND jerry@jnsmartrealty.com

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

For further information concerning this matter, please call:

Adon Solomon

770 858-1288
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JNL Smart Realty, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adon J. Solomon

Name of Person

Cohen Pollock Merlin and Turner, P.C.

Firm/Company

3350 Riverwood Parkway, Suite 1600

Address

Atlanta, GA 30339

City/State and Zip Code

asolomon@cpmlaw.com AND jerry@jnlsmartrealty.com

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

For further information concerning this matter, please call:

Adon Solomon

at (770) 858-1288

Name of 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:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: JNL Smart Realty, LLC

Enter new principal office address, if applicable: _____

(Principal office address)

MUST BE A STREET ADDRESS

Enter new mailing address, if applicable: _____

(Mailing address)

MAY BE A POST OFFICE BOX

2. The Florida document number of this limited liability company is: M21000010618

3. Jurisdiction of its organization: Georgia

4. Date authorized to do business in Florida: 08/16/2021

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

2021 OCT -4 PM 5:07
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

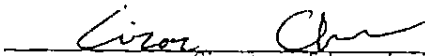
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

The Manager of the LLC has been changed from Jerry Cohen to Liron Ohana

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jerry Cohen	4555 Mansell Road, Suite 300	<input type="checkbox"/> Add
		Alpharetta, GA 30022	<input checked="" type="checkbox"/> Remove
MGR	Liron Ohana	4555 Mansell Road, Suite 300	<input checked="" type="checkbox"/> Add
		Alpharetta, GA 30022	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Liron Ohana

Typed or printed name of signee

Filing Fee: \$25.00