

M220000003278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entry Name)

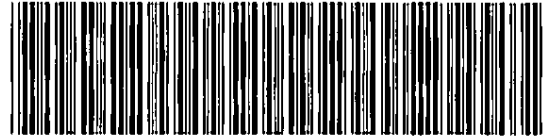
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900382794789

2022 MAR -3 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2022 MAR -3 PM 3:36

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 525459 7673228

AUTHORIZATION :

COST LIMIT : \$155.00

ORDER DATE : March 3, 2022

ORDER TIME : 1:58 PM

ORDER NO. : 525459-005

CUSTOMER NO: 7673228

FOREIGN FILINGS

NAME: JBM ENERGY SOLUTIONS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

FILED
2022 MAR -3 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JBM Energy Solutions, 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:

Bethany Rabe

Name of Person

JBM Energy Solutions, LLC

Firm/Company

100 Lenox Drive, Suite 100

Address

Lawrenceville, NJ 08648

City/State and Zip Code

brabe@jingoli.com

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

For further information concerning this matter, please call:

Bethany Rabe

609

512-2201

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$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

FILED
2022 MAR -3 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. JBM Energy Solutions, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. New Jersey
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 86-2507296
(FEI number, if applicable)
4. Did not transact business in Florida prior to registration
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)
5. 5060 Shoreham Place
(Street Address of Principal Office)
Suite 105
San Diego, CA 92122
6. 100 Lenox Drive
(Mailing Address)
Suite 100
Lawrenceville, NJ 08648
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Corporation Service Company
- Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (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.

By: Corporation Service Company

Eylina Bahar
Assistant Vice President

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>CEO & President</u>	<u>J. Bruce Mayberry</u> <u>5060 Shoreham Pl. Ste 105</u> <u>San Diego, CA 92122</u>	<u>CFO</u>	<u>Michael D. Jingoli</u> <u>100 Lenox Dr, Ste 100</u> <u>Lawrenceville, NJ 08648</u>
<u>Vice President</u>	<u>Brian J. Gibson</u> <u>100 Lenox Dr, Ste 100</u> <u>Lawrenceville, NJ 08648</u>		

(Use attachments if necessary)

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.

J. Bruce Mayberry
Signature of an authorized person
J. Bruce Mayberry
Typed or printed name of signer

2022 APR -3 AM 9:33
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

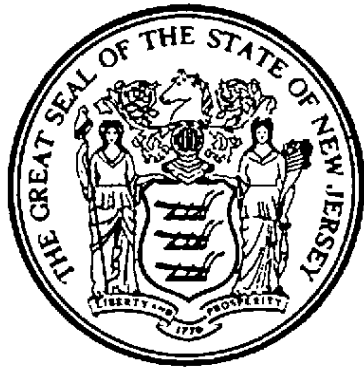
JBM ENERGY SOLUTIONS, LLC
0450616579

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on March 09, 2021.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

MICHAEL D. JINGOLI
100 LENOX DRIVE
SUITE 100
LAWRENCEVILLE, NJ 08648



*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
3rd day of March, 2022*



Elizabeth Maher Muoio
State Treasurer

Certificate Number : 6129144441

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp