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## COVER LETTER

NJN Construction LLC	2.
SUBJECT:	
	Name of Limited Liability Company
	Limited Liability Company for Authorization to Transact Business in Florida," Certifica register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence cone	erning this matter to the following:
Noam Jakobov	
	Name of Person
NJN Construction, I	LLC.
	Firm/Company
6210 Chatham Driv	e S
<del></del>	Address
Seattle, WA 98118	
Noamjk100@gmail.c	City/State and Zip Code
Ç	
E-	mail address: (to be used for future annual report notification)
for further information concerning th	is matter, please call:
Noam Jakobov	702 488-1705
	at ()
Name of Co	ontact Person Area Code Daytime Telephone Number
Mailing Address: Street Address:	
Registration Section	Registration Section
Division of Corporation	,
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
linglaced is a about for the fi	ollowing amount:
cherosed is a cheek for the re	
Please make check payable t	o: <b>FLORIDA DEPARTMENT OF STATE</b> I \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificat

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

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: NJN CONSTRUCTION, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") NJN CONSTRUCTION, LLC. off name unavailable, cuter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LL-C," or "LLC,") WASHINGTON STATE (Jurisdiction under the law of which foreign limited hability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty hability) 2301 LAGUNA CIRLE 6210 CHATHAM DRIVE S (Street Address of Principal Office) (Mailing Address) **UNIT 1707** SEATTLE, WA 98118 NORTH MIAMI, FL 33181 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) NOAM JAKOBOV Name: 2301 LAGUNA CIRCLE, UNIT 1707 Office Address: NORTH MIAMI 33181 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.

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]: Title or Capacity: Title or Capacity: Name and Address: Name and Address: NOAM JAKOBOV □ Manager Name: Name: □ Manager 6210 CHATHAM DR S **M**ember Address: \_ Address: SEATTLE, WA 98118 Authorized ☐ Authorized Person Person □ Other □Other\_\_\_\_ □ Other □Other\_\_\_\_ □Manager Name: \_ \_ □Manager □Member Address: ☐ Member Address: Authorized □ Authorized 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. 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

NOAM JAKOBOV



**《大学》** 

# Secretary of State

1, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

### CERTIFICATE OF EXISTENCE

**OF** 

#### NJN CONSTRUCTION, LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 08/03/2021.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 06/05/2022 UBI Number: 604 783 272

Oven under my hand and the Seal of the State of Washington at Olympia, the State Capital

to R Hobbie

Steve R. Hobbs, Secretary of State

Date Issued 06/05/2022