

M23000015795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

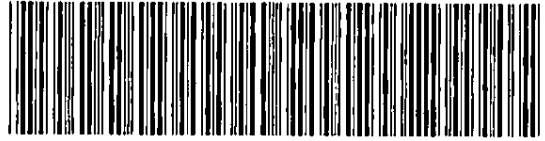
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 DEC 19 AM 10:28
DEPARTMENT OF STATE
HALL OF RECORDS, TALLAHASSEE, FLORIDA

APPROVED
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2023 DEC 19 PM 4:24

DEC 19 2023

K. Brumblay

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312
(850) 656-4724

DATE 12/19/2023

****WALK IN****

ENTITY NAME JM Family Automotive LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$125

ACCOUNT #: I20160000072

S R J

Please call Tina at the above number for any issues or concerns. Thank you so much!

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. JM Family Automotive LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)
3. (FEI number, if applicable)

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

5. 100 Jim Moran Blvd. Deerfield Beach, FL 33442 (Street Address of Principal Office)
6. 100 Jim Moran Blvd. Deerfield Beach, FL 33442 (Mailing Address)

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

Name: United Agent Group Inc.
Office Address: 801 US Highway 1
North Palm Beach, Florida 33408
(City) (Zip code)

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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.

/s/ Tiffany Meeker Tiffany Meeker, Special Secretary
(Registered agent's signature)

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: **Name and Address:**

Manager Name: Brent D. Burns

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL 33442

Person _____

Other President/Director Other _____

Manager Name: Brent T. Sergot

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL33442

Person _____

Other Executive Vice President Other _____

Director Other _____

Manager Name: Stephen P. Artusi

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL33442

Person _____

Other Senior Vice President, x Other _____

General Counsel, Corporate Services Other _____

and Secretary

Title or Capacity: **Name and Address:**

Manager Name: Daniel M. Chait

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL33442

Person _____

Other Executive Vice President Other _____

and Chief Operating Officer Other _____

Director

Manager Name: RaviTheja Abbineni

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL33442

Person _____

Other Senior Vice President and Other _____

Chief Financial Officer

Manager Name: Charles Couch

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL33442

Person _____

Other Senior Vice President and Chief Information Other _____

Officer

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)

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: **Name and Address:**

Manager Name: Scott T Gunnell

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL 33442

Person _____

Other Senior Vice President _____

Title or Capacity: **Name and Address:**

Manager Name: William J. Shope

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL 33442

Person _____

Other Vice President _____ Other _____

Manager Name: Corey M. Benish

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL 33442

Person _____

Other Group Vice President, IT, Chief Operating Officer _____ Other _____

Manager Name: John Damalas

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL 33442

Person _____

Other Group Vice President, Chief Technology Officer _____ Other _____

Manager Name: Lisbeth S. Heggerick

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL 33442

Person _____

Other Group Vice President, Human Resources and Communications _____ Other _____

Manager Name: Rosie Puello Burkman

Member Address: 101 Jim Moran Blvd.

Authorized Deerfield Beach, FL 33442

Person _____

Other Vice President, Corporate Community Impact and Corporate Services _____ Other _____

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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.

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: **Name and Address:**

Manager Name: Victor M. Campos, Jr.
 Member Address: 101 Jim Moran Blvd.
 Authorized Deerfield Beach, FL 33442
 Person _____

Other Vice President, Chief Information Security Officer Other _____

Title or Capacity: **Name and Address:**

Manager Name: Daniel M. Chupp
 Member Address: 101 Jim Moran Blvd.
 Authorized Deerfield Beach, FL 33442
 Person _____

Other Vice President, Technology Operations & Governance Other _____

Manager Name: Michelle Esposito
 Member Address: 101 Jim Moran Blvd.
 Authorized Deerfield Beach, FL 33442
 Person _____

Other Vice President, ITS Planning Other _____

Manager Name: Charles S. Gordon
 Member Address: 101 Jim Moran Blvd.
 Authorized Deerfield Beach, FL 33442
 Person _____

Other Vice President, Enterprise Risk Officer Other _____

Manager Name: Liza J. Greene
 Member Address: 101 Jim Moran Blvd.
 Authorized Deerfield Beach, FL 33442
 Person _____

Other Vice President, People and Culture Other _____

Manager Name: Anne Marie Groblewski
 Member Address: 101 Jim Moran Blvd.
 Authorized Deerfield Beach, FL 33442
 Person _____

Other Vice President, Facilities Management and Procurement Other _____

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JM FAMILY AUTOMOTIVE 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 FOURTEENTH DAY OF DECEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JM FAMILY AUTOMOTIVE LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF APRIL, A.D. 1969.

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



710510 8300

SR# 20234221450

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204812033

Date: 12-14-23