# MAYMW 7454

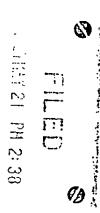
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☐ PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates of	Status
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T. LEMIEUX

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## COVER LETTER

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	istration Section ision of Corporations		
SUD IFOT.	JDCOM TX Realty Spring, LLC		
SUBJECT.	Nam	ne of Limited Liability Company	
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florid	
Please return	all correspondence concerning this matter	to the following:	
	Ayelet Rotem		
	<del>.</del>	Name of Person	
	Corporate Direct, Inc.		
		Firm/Company	
	2248 Meridian Blvd., Ste H	Time Company	
	2240 Mendian bivo., Ste Fi		
		Address	
	Minden, NV 89423		
	(	City/State and Zip Code	
	info@corporatedirect.com		
	E-mail address: (to b	e used for future annual report notification)	
For further in	formation concerning this matter, please ca	di:	
Ayelet Rotem		775 284-7165	
	Name of Contact Person	at () Area Code Daytime Telephone Number	
	Name of Contact Person	Area Code Daytime Telephone Number	
Mailing Address:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tal	lahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	losed is a check for the following amount: see make check payable to: FLORIDA DEI	PARTMENT OF STATE	
	125.00 Filing Fee  \$130.00 Filing Fe Certificate (	re & 🗹 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate	

# 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 HABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Limited Liability Company; must include "L	imited Liability Cor	mpany," "L.L.C.," or "E.L.C. )			
f'name unavailable, enter alternate	name adopted for the purpose of transacting busines	s in Florida. The altern	ate name must include "Limited I	iability Company," "I	. 1. C," or "1.LC.")	
Texas		2				
(Jurisdiction under the law of which foreign limited liability company is organized)		3	(FEI num	(FEI number, if applicable)		
	(Date first transacted business in Florida, if pr (See sections 605 0904 & 605,0905, F.S. to d	ior to registration.) etermine penalty liabil	ity)			
5900 Balcones Drive,	Suite 100	6 590	00 Balcones Drive, Suite	100		
treet Address of Principal Office)		0	(Mailing Address)			
Austin, TX 78731		Aus	stin, TX 78731			
Name and street addre	ss of Florida registered agent: (P.O.	Box NOT acce	ptable)		<u> </u>	
					ಫ <b>ರ</b>	
Name:	Registered Agents Inc			ξ. : <u>:</u> :	F = 1	
Name: Office Address:	Registered Agents Inc 7901 4th St N STE 300			-		
	7901 4th St N STE 300		, Florida 33702		M D	
Office Address: Registered agent's acceptoring been named as relessing to the second of the second of the provise of the provise the provi	7901 4th St N STE 300  St. Petersburg  (City)	nt as registered oper and comple	, Florida (Zip code) the above stated limited agent and agree to act	liability compa	my at the place. I further ag	

(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: Title or Capacity: Name and Address: Name: JD Holding Ventures, LLC **M**Manager □Manager Address: 300 N. Center Street, Unit 6 ☐ Member □Member Address: \_\_\_\_\_ Casper, WY 82601 □ Authorized □ Authorized Person Person Other\_\_\_\_ Other\_\_\_\_ □Other\_\_\_\_ □Other Name: \_\_\_\_\_ □Manager □Manager Name: \_\_\_\_\_\_ □Member Address: ☐ Member Address: \_\_\_\_\_ □ Authorized □ Authorized Person Person Other\_\_\_\_ □Other \_\_\_\_ □Other Other\_\_\_\_ □Manager Name: \_\_\_\_\_ □Manager Name: □Member Address: \_\_\_\_\_ Address: ☐ Member ☐ 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 Ayelet Rotem, Authorized Signer

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

# Office of the Secretary of State

### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for JDCOM TX Realty Spring, LLC (file number 805535130), a Domestic Limited Liability Company (LLC), was filed in this office on May 03, 2024.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 08, 2024.



Jane Melson

Jane Nelson Secretary of State