Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 : (718)504-7890 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: contact@interstatefilings.com

FLORIDA PROFIT/NON PROFIT CORPORATION KDJ PRODUCTS INC.

Certificate of Status	0
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J. FASON

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Help

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Name and	: 3 Title:	Name and Title:		
Address		Address:		
*				
ARTICLE VI	REGISTERED AGENT			
The name and Fl	orida street address (P.O. Box NOT acceptable) o	f the registered agent is:		
		f the registered agent is:		
· Name:	orida street address (P.O. Box NOT acceptable) o	<u>-</u>	,	`
	orida street address (P.O. Box NOT acceptable) o JODHAN, DILLON	<u>-</u>		2820 DI
· Name:	JODHAN, DILLON 11720 ST ANDREWS PL 203	<u>-</u>		2829 DEC 2
· Name:	JODHAN, DILLON 11720 ST ANDREWS PL 203	<u>-</u>		2820 DEC 28
Name: Address: ARTICLE VII	JODHAN, DILLON 11720 ST ANDREWS PL 203 WELLINGTON, FL 33414	<u>-</u>	,	

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I gan familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature Registered Agent

I submit this document and affirm that the facts stoled herein are true. I am aware that the false information submitted in a document to the Department of State constitutes of third degree felony as provided for in s. 817.155, F.S.

Required Signature Insorporator

338 OAKFORD STREET

W. Hempstead, NY 11552

Name:

Address:

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