

202017510009

Secretary of State

Application to Register a Foreign Limited
Liability Company (LLC)

IMPORTANT - Read Instructions before completing this form.

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed. See Instructions.

Filing Fee - \$70.00

Copy Fees - First page \$1.00; each attachment page \$0.50;

Certification Fee - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to https://www.ftb.ca.gov.

Secretary of State
State of California

JUN 16 2020

1pc

This Space For Office Use Only

1a. LLC Name (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)

_		_			_
- 1	ы	Λ			•
		м.	_	L	٠.

1b. California Alternate Name, If Required (See Instructions - Only enter an alternate name if the LLC name in 1a not available in California.)

2. LLC History (See Instructions - Ensure that the formation date and jurisdiction match the attached Certificate of Good Standing.)

a. Date LLC was formed in home jurisdiction (MM/DD/YYYY)

b. Jurisdiction (State, foreign country or place where this LLC is formed.)

5 / 29 / 2020

Delaware

c. Authority Statement (Do not alter Authority Statement)

This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2b.

3. Business Addresses (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Street Address of Principal Executive Office - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
8 The Green St. R	Dover	DE	19901
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
4827 Oak Park Avenue	Encino	CA	91316
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code

4. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation) Jill	Middle Name	Last Name Arnstein			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)		State	Zip Cod	de
4827 Oak Park Avenue	Encino		CA	9131	6

CORPORATION – Complete Item 4c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 4a or 4b

5. Read and Sign Below (See Instructions. Title not required.)

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign

on behalf of the foreign LLC.

Type or Print Name



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JHA 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

FIFTH DAY OF JUNE, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JHA LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF MAY, A.D. 2020.

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

Authentication: 203059402

Date: 06-05-20

202017510009