



GEORGIA
CORPORATIONS
DIVISION

GEORGIA SECRETARY OF STATE
BRAD RAFFENSPERGER

[HOME \(/\)](#)

BUSINESS SEARCH

BUSINESS INFORMATION

Business Name: **J2 Connect, Inc.** Control Number: **10016573**

Business Type: **Domestic Profit Corporation** Business Status: **Active/Owes Current Year AR**

Business Purpose: **NONE**

Principal Office Address: **5365 Dividend Drive, Suite A, Decatur, GA, 30035, USA** Date of Formation / Registration Date: **3/3/2010**

State of Formation: **Georgia** Last Annual Registration Year: **2020**

REGISTERED AGENT INFORMATION

Registered Agent Name: **Jackson, Broderick**

Physical Address: **880 Confederate Ave Apt 208, Atlanta, GA, 30312, USA**

County: **Fulton**

OFFICER INFORMATION

Name	Title	Business Address
Broderick Jackson	CEO	5365 Dividend Drive, Suite A, Decatur, GA, 30035, USA
Broderick Jackson	Secretary	5365 Dividend Drive, Suite A, Decatur, GA, 30035, USA
Broderick Jackson	CFO	5365 Dividend Drive, Suite A, Decatur, GA, 30035, USA

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Office of the Georgia Secretary of State Attn: 2 MLK, Jr. Dr. Suite 313, Floyd West Tower Atlanta, GA 30334-1530,
Phone: (404) 656-2817 Toll-free: (844) 753-7825, WEBSITE: <https://sos.ga.gov/>

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BUSINESS SEARCH

BUSINESS INFORMATION

Business Name: **J SQUARED PLUMBING COMPANY, INC.** Control Number: **0678287**

Business Type: **Domestic Profit Corporation** Business Status: **Active/Compliance**

Business Purpose: **NONE**

Principal Office Address: **5365 Dividend Drive, Suite A, Decatur, GA, 30035-3834, USA** Date of Formation / Registration Date: **7/6/2006**

State of Formation: **Georgia** Last Annual Registration Year: **2022**

REGISTERED AGENT INFORMATION

Registered Agent Name: **Jackson, Broderick Dwayne**

Physical Address: **5365 Dividend Dr, Suite A, Decatur, GA, 30035, USA**

County: **Dekalb**

OFFICER INFORMATION

Name	Title	Business Address
Broderick Dwayne Jackson	Secretary	5365 Dividend Dr, Suite A, Decatur, GA, 30035, USA
Broderick Dwayne Jackson	CFO	5365 Dividend Drive, Suite A, Decatur, GA, 30035, USA
Broderick Dwayne Jackson	CEO	5365 Dividend Drive, Suite A, Decatur, GA, 30035, USA

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CITY OF STONECREST

BUSINESS LICENSE

OCCUPATIONAL TAX CERTIFICATE
3120 STONECREST BLVD
STONECREST, GA 30038

2020

ACCOUNT NUMBER: BL18-239439

**BUSINESS NAME: J SQUARED PLUMBING
CO**

**DESCRIPTION: PLUMBING, HEATING &
AIR-CONDITIONING CONTRACTORS**

NAICS CODE: 238220

DATE ISSUED: 02/13/2020

EXPIRES: 12/31/2020

MAIL TO:
J SQUARED PLUMBING CO
5365 DIVIDEND DR S A
STONECREST, GA 30035

BUSINESS LOCATION:
5365 DIVIDEND DRIVE SUITE A
STONECREST, GA 30035

NON REFUNDABLE - NON TRANSFERABLE

THIS LICENSE MUST BE POSTED IN PUBLIC VIEW



ROCKDALE COUNTY PLANNING AND DEVELOPMENT
BUSINESS LICENSE CHECKLIST
Commercial or Home Occupation

SUBMIT:

- Completed application form (enclosed)
- Georgia's driver's license or Georgia ID
- Fee (check or money order made payable to Rockdale County, credit card, or *exact* cash)
- Affidavit Verifying Citizenship Status form (enclosed)
- Proof of occupancy: Signed lease agreement with applicant's name, signed and notarized letter from property owner, or Tax Records
- E-Verify Compliance form (enclosed)
- Commercial licenses only: Compliance Inspection application package (separate file)

IMPORTANT CONTACT INFORMATION:

- To register a corporation (including LLC): Secretary of State (404-656-2817) (www.sos.state.us/corporations)
- To register as a child care provider: Bright from the Start (www.decal.ga.gov, 404-656-5957)
- To register as a personal care home: Department of Human Resources (<http://aging.dhs.georgia.gov/adult-day-care>, 404-657-4076)
- For commercial fleet: Georgia Department of Driver Services (www.dds.ga.gov, 678-413-8400), US Department of Transportation (DOT) (www.dot.state.us)
- For cottage food: Georgia Department of Agriculture (www.agr.state.ga.us) (404-656-3627)
- For food services: Food Inspection Report or Permit from Rockdale County Board of Environmental Health (www.rockdalehealth.com, 770-278-7342). Rockdale County Water Resources Fat, Oil & Grease (FOG) program (grease traps and interceptors): 770-278-7450.
- To obtain a federal employer identification number (EIN): Internal Revenue Service (Form SS-4: [http://www.irs.gov/Businesses/Small-Businesses-&Self-Employed/Apply-for-an-Employer-Identification-Number-\(EIN\)-Online](http://www.irs.gov/Businesses/Small-Businesses-&Self-Employed/Apply-for-an-Employer-Identification-Number-(EIN)-Online))
- To obtain a state tax ID number: Department of Revenue (877-423-6711, Form CRF-002: <http://dor.georgia.gov/documents/crf-002>)

Department of Planning and Development contact information:

In person: 958 Milstead Avenue, Conyers, GA 30012 • Monday through Friday, 8:00am to 5:00pm	
Mail: P.O. Box 289, Conyers, GA 30012	Phone: 770 278-7100
Email: businesslicense@rockdalecountyga.gov	Fax: 770 278-8940



ROCKDALE COUNTY PLANNING AND DEVELOPMENT
 P.O. Box 289/958 Milstead Avenue, Conyers, GA 30012
 Phone: 770-278-7100
 Email: businesslicense@rockdalecountyga.gov

BUSINESS LICENSE AND OCCUPATIONAL TAX APPLICATION

Business Information

Name of Business /DBA
J2 Connect Inc.

Business Type (check one) Home Occupation Commercial

Ownership Type (check one) Single Proprietor (Owner) Partnership Corporation LLC

Business Physical Address
3137 E. Fairview Rd. McDonough, GA 30252

Business Telephone Number <u>404-545-7295</u>	Number of Employees <u>7</u>	E-Verify Number <u>406419</u>	NAICS Code <u>238220</u>
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Business Mailing Address
3137 E. Fairview Rd. McDonough, GA 30252

Detailed Business Description
Plumbing General Contractor

Business Owner Information

Name of Owner (First) (Middle) (Last)
Broderick Dwayne Jackson

Address
3137 E. Fairview Rd. McDonough, GA 30252

E-Mail Address <u>bjackson@j2plumbing.com</u>	Work Telephone Number <u>404-545-7295</u>	Cell Telephone Number <u>404-353-1465</u>
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Corporate Information (if applicable)

Name of Corporation <u>J2 Connect Inc.</u>	Corporate Address <u>3137 E. Fairview Rd McDonough, GA 30252</u>
Federal Employer ID Number (EIN) <u>27-2047414</u>	GA State Tax ID Number <u>20110931540</u>
Corporate Officer Name/Title <u>Broderick Jackson Pres.</u>	Officer's Telephone Number <u>404-353-1465</u>
Local Contact Name <u>SAME AS ABOVE</u>	Contact's Telephone Number <u>-</u>
	Officer's Email Address <u>bjackson@j2plumbing.com</u>
	Contact's Email Address <u>-</u>

State License (if applicable)

License Type <u>Master Plumber II - Unrestricted</u>	License Number <u>MP209551</u>
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This application is to be executed under the following oath: "I solemnly swear, subject to criminal penalties for false swearing that the information in this application is true and correct and that the application is herein made to procure the granting of this license."

Signature: [Signature] Print Name: Broderick Jackson

Date: 12/18/20



AFFIDAVIT VERIFYING CITIZENSHIP STATUS

O.C.G.A. 50-36-1(e)(2)

By executing this affidavit under oath, as an applicant for a Permit or License, as referenced in O.C.G.A. 50-36-1, from Rockdale County, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- I am a United States citizen.
- I am a legal permanent resident of the United States.
- I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____

_____, the undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. 50-36-1(e)(1), with this affidavit.

Wait to be in front of notary to sign

[Signature]
Applicant signature

The secure and verifiable document provided with this affidavit can best be classified as:

(type of document)

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in Atlanta GA, this 11th day of January, 2021
(city) (state) (day) (month) (year)

For notary use only

[Signature] N.E.A.
Notary Public signature

W-00397331 1/29/2023
GA Registration No. and expiration date





E-VERIFY COMPLIANCE FORM

O.C.G.A. §36-60-6(d).

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. §36-60-6(d).

SECTION I

Check only one:

<input checked="" type="checkbox"/> On January 1 st of the current year, the individual, firm or corporation employed <u>ten (10) or fewer</u> employees. <i>Skip to Section II</i>
<input type="checkbox"/> On January 1 st of the current year, the individual, firm or corporation employed <u>more than ten (10)</u> employees.
The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. §36-60-6. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows: Name of exempt private employer (company name): Federal Work Authorization User Identification Number: Date of authorization: <i>Complete Section II</i>

SECTION II - Wait to be in front of notary to fill out

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed in Cumyco GA, this 4th day of January, 2021
(city) (state) (day) (month) (year)

[Signature]
Applicant signature

Brosnick J. Kiser Pres/CEO
Applicant name and title

For notary use only

[Signature]
Notary Public signature

W-00397331 1/29/2023
GA Registration No. and expiration date



CUSTOMARY HOME OCCUPATION AGREEMENT
Rockdale County Unified Development Ordinance [Section 218-13 \(dd\)](#)

PLEASE READ CAREFULLY

1. Only residents of the dwelling containing the home occupation may be engaged in the home occupation. The home occupation shall not involve group assembly or group instruction on the premises.
2. The home occupation shall be clearly incidental to the residential use of the dwelling and shall not change the residential character of the building.
3. No products may be produced, stored or sold on the premises; except that bona fide agricultural products grown on the premises may be displayed in A-R district and the W-P district.
4. Use of the building for the purpose of a home occupation shall not exceed 25 percent of the square footage of one floor of the principal building.
5. No internal or external alterations inconsistent with the residential use of the building shall be permitted. No exterior evidence of the conduct of a home occupational shall be allowed. No signage of any kind for the home occupation is allowed.
6. The home occupation shall not constitute a nuisance to the neighborhood. Furthermore, except as would be caused by a typical residential use, no noise, vibration, dust, odor, smoke, glare or electric disturbance that is perceptible beyond any property line will be permitted to occur as a result of the home occupation.
7. No accessory buildings or outside storage shall be used in connection with the home occupation.
8. Only one vehicle shall be permitted in connection with the home occupation. That vehicle must be one that is designed and used primarily as a passenger vehicle with a carrying capacity of less than ¾ ton.
9. No earth-moving equipment or heavy construction or hauling equipment shall be allowed on the premises.
10. Pursuant to the above requirements, a home occupation includes, but is not limited to, activities such as the following:
 - a. Art studio
 - b. Dressmaking
 - c. Teaching of any kind, provided instruction is limited to not more than two pupils at a time.
 - d. However, a home occupation shall not be interpreted to include any occupation or profession providing medical or mental health services including, but not limited to, physician, veterinarian, dentist, psychiatrist or psychologist and it shall not be interpreted to allow the preparation of food for sale on the premises.
11. No more than one vehicle used in the home occupation may be parked on the premises overnight, and no more than one additional vehicle connected with the home occupation may be parked on the premises during the day, provided the gross vehicle weight of each such vehicle shall not exceed two tons.

QUESTIONNAIRE:

Besides a computer and telephone, what other kinds of equipment do you have associated with your home business? VAP, Tools

Do all parties listed on the license currently live in the home where the business is being licensed?

Yes No

Do you live in the home that is listed on the application?

Yes No

Will there be vehicles such as trucks coming to and from your property?

Yes No

If yes, explain: Mine, Not deliveries except small UPS, FedEx

How will you deliver your products or services to your customer?

We go to customers 100% of time

Describe in detail how your business will be conducted.

Mainly through network of independent contractors, our employees work from home dispatching, and techs start from home.



HOME OCCUPATION AFFIDAVIT

I, (name) Broderick Jackson, applying for a business license for

(Name of business) J 2 Connect Inc. located at

(Address) 3137 E Fairview Rd have been given Code Section 218-13 (dd), The Customary Home Occupation Agreement. By my signature below, I attest that I have read and understood the agreement. I have an "office only" preparing paperwork for my business in my home. I will not have any person connected to the business at my home except those living in the dwelling. As part of the Home Occupation I understand I must live in the above dwelling.

I understand that this license is not to be construed as permission to use a facility, public or private. Any activity conducted at such a location will abide by the rules and regulations of usage of said facility.

By signing this affidavit I am accepting responsibility that all local, state and federal regulations have been met.

Wait to be in front of notary to sign

[Signature]
Applicant signature

Executed in Concord, GA, this 4th day of January, 2021
(city) (state) (day) (month) (year)

For notary use only

[Signature]
Notary Public signature

W-00397331 1/29/2023
GA Registration No. and expiration date

SEAL





STATE OF GEORGIA
BRAD RAFFENSPERGER, Secretary of State
Georgia Construction Industry Licensing Board
LICENSE NO. MP209551
Broderick Dwayne Jackson

3137 E Fairview Road
McDonough GA 30252

Master Plumber - Non-Restricted

EXP DATE - 11/30/2022 Status: Active
Issue Date: 05/09/2006

A pocket-sized license card is below. Above is an enlarged copy of your pocket card.

Please make note of the expiration date on your license. It is your responsibility to renew your license before it expires. Please notify the Board if you have a change of address.

Wall certificates suitable for framing are available at cost, see board fee schedule. To order a wall certificate, please order from the web site – www.sos.ga.gov/plb.

Please refer to Board Rules for any continuing education requirements your profession may require.

Georgia State Board of Professional Licensing
237 Coliseum Drive
Macon GA 31217
Phone: (404) 424-9966
www.sos.ga.gov/plb

Broderick Dwayne Jackson
3137 E Fairview Road
McDonough GA 30252



STATE OF GEORGIA
BRAD RAFFENSPERGER, Secretary of State
Georgia Construction Industry Licensing Board
License No. MP209551
Broderick Dwayne Jackson

3137 E Fairview Road
McDonough GA 30252

Master Plumber - Non-Restricted

EXP DATE - 11/30/2022 Status: Active
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