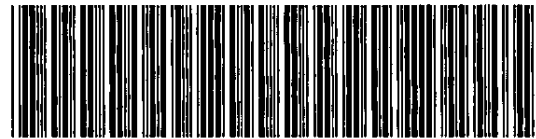


M1700000 5582



400297550774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

04/07/17--01009--012 **130.00

FILED
2017 JUN 26 PM 4: 22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

STATS 1/1/17

JUN 30 2017
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

Luxor Investments LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Uniel Molina

Name of Person

Firm/Company

1050 W 49TH ST #28063

Address

Hialeah, FL 33002

City/State and Zip Code

yu882@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Uniel Molina

786

2696557

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2017

UNIEL MOLINA
1050 W 49TH ST #28063
HIALEAH, FL 33002

SUBJECT: LUXOR INVESTMENTS LLC
Ref. Number: W17000031043

FILED
2017 JUN 26 PM 4: 22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

We have received your document for LUXOR INVESTMENTS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The alternate name that you have chosen is not available. Please select a new name.

The document number of the name conflict is L14000157987.

A business entity may not serve as its own manager or managing member. Please designate an individual or another business entity as your manager(s) or managing member(s).

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 417A00011840

RECEIVED
2017 JUN 26 PM 12: 40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 10, 2017

UNIEL MOLINA
1050 W 49TH ST #28063
HIALEAH, FL 33002

SUBJECT: LUXOR INVESTMENTS LLC
Ref. Number: W17000031043

We have received your document for LUXOR INVESTMENTS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L01000017589.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 817A00006889

2017 JUN -8

TALLAHASSEE

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. Luxor Investments LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

LUXOR HOMES USA, 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. Wyoming 3. 32-0521507
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 4/8/17
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1050 W 49TH ST #28063
HIALEAH, FL 33002
(Street Address of Principal Office)

6. 1050 W 49TH ST #28063
HIALEAH, FL 33002
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Uniel Molina
Office Address: 1050 W 49th st #28063
HIALEAH, Florida 33002
(City) (Zip code)

FILED
2017 JUN 26 PM 4:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

[Signature]
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Member Manager, Ocean Blue Investments, LLC
1050 W 49th ST #28063
Hialeah, FL 33002

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)

[Signature]
Signature of an authorized person

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.

Uniel Molina
Typed or printed name of signee

STATE OF WYOMING
Office of the Secretary of State

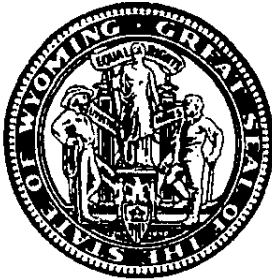
I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

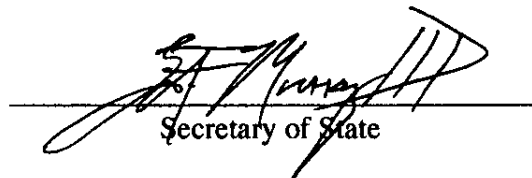
Luxor Investments, LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **November 16, 2016**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2016-000732819**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 21st day of June, 2017 at 10:38 AM. This certificate is assigned 023408628.




Secretary of State

STATE OF WYOMING * SECRETARY OF STATE
ED MURRAY
BUSINESS DIVISION

2020 Carey Avenue, Cheyenne, WY 82002-0020

Phone 307-777-7311 · Fax 307-777-5339

Website: <http://soswy.state.wy.us> · Email: business@wyo.gov

Filing Information



Please note that this form **CANNOT** be submitted in place of your Annual Report.

Name Luxor Investments, LLC

Filing ID 2016-000732819

Type	Limited Liability Company	Status	Active
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General Information

Old Name		Sub Status	Current
Fictitious Name		Standing - Tax	Good
		Standing - RA	Good
Sub Type		Standing - Other	Good
Formed in	Wyoming	Filing Date	11/16/2016 12:02 PM
Term of Duration	Perpetual	Delayed Effective Date	
		Inactive Date	

Principal Address

412 N Main St Ste 100
Buffalo, WY 82834

Mailing Address

412 N Main St Ste 100
Buffalo, WY 82834

Registered Agent Address

Registered Agents Inc.
412 N Main St Ste100
Buffalo, WY 82834

Parties

Type	Name / Organization / Address
Organizer	Registered Agents Inc. 412 N Main St Ste 100 Buffalo, WY 82834

Notes

Date	Recorded By	Note
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Annual Report History

Num	Status	Date	Year	Tax
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Amendment History

ID	Description	Date
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Filing Information



Please note that this form **CANNOT** be submitted in place of your Annual Report.

Name **Luxor Investments, LLC**

Filing ID **2016-000732819**

Type **Limited Liability Company**

Status

Active

See Filing ID

Initial Filing

11/16/2016