

M230000010484

(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:

W23000108631

Office Use Only



700413368207

08/11/23--01001--008 \*\*\$388.75

08/14/23--01001--007 \*\*125.00

RECEIVED FILING  
2023 AUG - 8 PM 3:29  
FLORIDA CORPORATION  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 9, 2023

FLORIDA CAPITAL COURIER SERVICES, INC

SUBJECT: HOMES UNLIMITED LLC  
Ref. Number: W23000108631

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

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$638.75.

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.

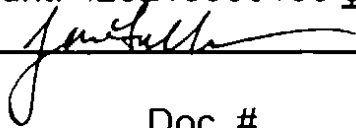
Corey Pettway  
Regulatory Specialist II

Letter Number: 323A00018029

RECEIVED  
2023 AUG 10 PM 2:23  
ALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

Please use funds from this account: I20210000160 **\$125.00**

Authorization Signature:   
Homes Unlimited LLC  
Business Name Doc. #

     **Certified Copy of ARTICLES**

     **Certificate of Status**

**NEW FILINGS**

- Profit Corp
- Not for Profit
- Officer/Director
- Limited Liability
- Domestication
- Other
- CORP**
- LLP**

**AMENDMENTS**

- Amendment
- Resignation of R.A.
- Change of Registered Agent
- Revocation of Dissolution
- Merger
- Conversion
- Amended and restated Articles
- Statement of Authority**

**OTHER FILINGS**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATIONS**

- X   Foreign filing
- Limited Partnership
- Reinstatement

     APOSTILLE  
                    Country

             Other

**EXAMINER'S INITIALS:** \_\_\_\_\_

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Homes Unlimited LLC

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:

Ye Zhang

Name of Person

Ivy Accounting Tax & Advisory

Firm Company

14738 SW 23rd St

Address

Miami, FL 33185

City/State and Zip Code

jacob@ivy-cpa.com

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

For further information concerning this matter, please call:

Ye Zhang

786

227-6928

Name of Contact Person

at (Area Code)

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

\$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

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Homes Unlimited LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC."

2. California 3. 87-2859318  
(Jurisdiction under the law of which foreign limited liability company is organized) (EIT number, if applicable)

4. January 1, 2022  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.004 & 605.005, F.S., to determine penalty liability)

5. 14738 SW 23rd St 6. 14738 SW 23rd St  
(Street address of Principal Office) (Mailing Address)  
Miami, FL 33185 Miami, FL 33185

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Yuhan Yu  
Office Address: 14738 SW 23rd St  
Miami 33185  
(City) Florida (Zip code)

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.

Yuhan Yu  
(Registered agent's signature)

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2023 AUG -8 PM 3:26  
FBI

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Yu, Yuhan</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Quan, Meiping</u>
<input checked="" type="checkbox"/> Member	Address: <u>14738 SW 23rd St</u>	<input checked="" type="checkbox"/> Member	Address: <u>14738 SW 23rd St</u>
<input checked="" type="checkbox"/> Authorized	<u>Miami, FL 33185</u>	<input checked="" type="checkbox"/> Authorized	<u>Miami, FL 33185</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.

Yuhan Yu \_\_\_\_\_  
Signature of an authorized person

Yuhan Yu \_\_\_\_\_  
Typed or printed name of signer



# Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

**Entity Name:** HOMES UNLIMITED LLC  
**Entity No.:** 202126011157  
**Registration Date:** 09/15/2021  
**Entity Type:** Limited Liability Company - CA  
**Formed In:** CALIFORNIA  
**Status:** Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of August 07, 2023.

**SHIRLEY N. WEBER, PH.D.**  
**Secretary of State**

**Certificate No.:** 135856128

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at [bizfileOnline.sos.ca.gov](http://bizfileOnline.sos.ca.gov).