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(Re	questor's Name)		
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Certified Copies	Certificates	of Status	
Special Instructions to I	Filing Officer:		

Office Use Only



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2024 FEB 28 PM 나: 27

COVER LETTER

TO:

то:	Registration Section Division of Corporations			
SUBJE	Light House Investment LLC			
		Name of Limited Liability Company		
The end Existen	closed "Application by Foreign Limited Liab ace, and check are submitted to register the al	oility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Florida.		
Please	return all correspondence concerning this ma	atter to the following:		
	Adam Lukas			
		Name of Person		
	Light House Investment LLC			
		Firm/Company		
	182 Timber Creek Dr			
	Address			
	Headland AL 36345			
	***	City/State and Zip Code		
	liftedhigherministries@hotmail.cor	n		
	E-mail address:	(to be used for future annual report notification)		
For furt	ther information concerning this matter, plea	se call:		
	Brandee Lukas	248 342-8488 at ()		
	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 amounted the second payable to: FLORIDA \$125.00 Filing Fee \$130.00 Filing Certification	DEPARTMENT OF STATE		



February 15, 2024

ADAM LUKAS 182 TIMBER CREEK DRIVE HEADLAND, AL 36345

SUBJECT: LIGHT HOUSE INVESTMENT LLC

Ref. Number: W24000025672

We have received your document for LIGHT HOUSE INVESTMENT LLC and your check(s) totaling \$160.00. 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.

If you have any questions concerning the filing of your document, please call (850) 245-6000. 2|26|24

Neysa Culligan Regulatory Specialist III

Letter Number: 324A00003381

RECEIVED

FEB 29 2024

- www.sunbiz.org

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS 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:

Light House Investmen				
(Name of Foreign	Limited Liability Company; must include "Limi	ted Liability Com	pany," "L.L.C.," or "LEC.")	
AB Light			LC	
(If name unavailable, enter alkalmate i	name adopted for the purpose of transacting business in	Florida, The alterna	te name must include "Limited Liabi	fity Company," "L.L.C," or "LLC.
State Of Alabama		2		
2. (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	(FEI number,	if applicable)
NA .				
4	(Date first transacted husiness in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to dete	to registration.) rmine penalty liabili	y)	_
Adam Lukas 5.			m Lukas	
(Street Address of Principal Office)			(Mailing Address)	
182 Timber Creek Dr		182	Timber Creek Dr	
Headland AL 36345		Hea	dland AL 36345	20
7. Name and street address	ss of Florida registered agent: (P.O. Bo	ox <u>NOT</u> accep	stable)	P4 FEB 28
Name:	Adam Lukas		_	PA PA
Office Address:	7630 Coastal Hammock Trl		_	PH 4: 27 CF SINE E. FLORIDA
	Panama City B <u>c</u> ach		32413 Florida	→ P →
	(City)		(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.

1. 0.

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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Adam Lukas	□Manager	Name: Brandee Lukas
■Member	Adam Lukas Address:	■Member	Address: Brandee Lukas
□Authorized	182 Timber Creek Dr	□Authorized	182 Timber Creek Dr.
Person	Headland AL 36345	Person	Headland AL 36345
□Other		□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name: TALL STEE
□Member	Address:	□Member	Address: SS 8
□Authorized		□Authorized	m _c p m
Person		Person	
□Other		□Other	Orn _J

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.

Adu The
Signature of an authorized person
Adam Lukas
Typed or printed name of signer

Wes Allen Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Wes Allen, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Light House Investment LLC was formed in Henry County on October 27, 2020. The Alabama Entity Identification number for this entity is 000-821-330. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20240124000026830

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

01/25/2024

Date

War Oel

Wes Allen

Secretary of State