

F1300000000183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

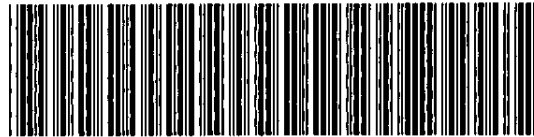
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/12/12--01003--009 **78.75

RECEIVED
DEPARTMENT OF STATE
DIVISION OF INCORPORATIONS
2012 DEC 11 PM 4:53
NOTED
TO A KNOWLEDGE
SUFFICIENCY OF FILING
FILED
12 DEC 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

11/15
12/12
90

W12-61716

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 12/11/12

NAME: LH&R TAHOE, INC.

TYPE OF FILING: FOREIGN CORPORATION

COST: 78.75

RETURN: CERTIFICATE OF STATUS

FILED
12 DEC 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ACCOUNT: ~~FC-10000000015~~

AUTHORIZATION: ABBIE/PAUL HODGE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2012

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: LH & R TAHOE, INC.
Ref. Number: W12000061416

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2013 JAN 14 PM 4:33
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

We have received your document for LH & R TAHOE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The registered agent must have a Florida street address. A post office box is not acceptable.

The FAX audit number must be on the top and bottom of each page of the document.

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) 245-6052.

Jessica A Fason
Regulatory Specialist II

Letter Number: 712A00029334

Please retain
original file date

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: LH & R Tahoe, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Cristy De Pozo

Name of Person

LH & R Tahoe, Inc..

Firm/Company

404 Camino Del Rio South 4th Floor

Address

San Diego, Ca 92108

City/State and Zip code

cristyd@resortcom.com

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

For further information concerning this matter, please call:

Cristy De Pozo

Name of Person

at (619) 683-2770 x 1519

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. **LH & R Tahoe, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **CA** 3. **27-1782920**

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. **02/12/2010** 5. **perpetual**

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

6. **12/28/2012**

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **404 Camino Del Rio South 4th Floor San Diego Ca. 92108**

(Principal office address)

404 Camino Del Rio South 4th Floor San Diego Ca. 92108

(Current mailing address)

8. **House ResortCom Elite, LLC Employees**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: **Florida Filing & Search Services Inc.**

Office Address: **155 OFFICE PLAZA DRIVE**

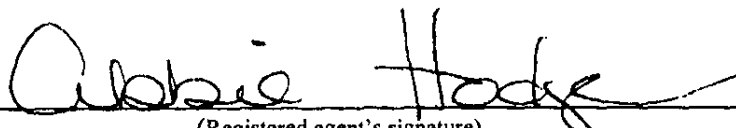
Tallahassee, Florida **32301**

(City)

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
12 DEC 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. John Small Vice Chairman

(Typed or printed name and capacity of person signing application)

FILED
12 DEC 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

LH&R TAHOE, INC.

FILE NUMBER: C3274755
FORMATION DATE: 01/26/2010
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

FILED
12 DEC 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, 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 December 31, 2012.

Debra Bowen

DEBRA BOWEN
Secretary of State

MAL