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SECRETARY OF STATE
TALLAHASSEE, FLORIS

APR 1 0 2015 S. GILBERT

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: A : E STAR HOMES, INC. Name of corporation - must include suffix	
Name of corporation - must include suffix	K
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Trai "Certificate of Existence," or "Certificate of Good Standing" and check are above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Amanda Ortiz	
Name of Person	
Firm/Company	
4580 Concord Landing Dr Apt	209
Orlando, FC.32780 City/State and Zip code	
AESTARHOMES @ octlock, con E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please call:	
Amonda Actiz muna yuna 1419	ИĴ
Amanda Ortiz at (407) 409 - 149 Name of Person Area Code & Daytime Tele	ephone Number
New Filing SectionNew FilingDivision of CorporationsDivision ofClifton BuildingP.O. Box 6	Corporations 327
2661 Executive Center Circle Tallahassec Tallahassee, FL 32301	e, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$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. <u>A & E STAR</u>				_
	orporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION,"		
inc., co., c	orp, me, co, or corp.)			
				-
(If name unavails	able in Florida, enter alternate corporate name adop	ted for the purpose of transacting bu	siness in Florida)	
2. Nevada	3.	47-35985	07	
(State or country	y under the law of which it is incorporated)	(FEI number, if applica	ble)	-
a olia	1.5	pernatual		
(Date		ration: Year corp. will cease to exis	t or "perpetual")	-
((100) (zeaistration			
o. <u>About</u>	(Date first transacted business in Flor	ida, if prior to registration)	*****	-
	(SEE SECTIONS 607.1501 & 607.1502, 1			
7. 4580 Com	road landing de quite 200 ox	2hmh Fl 22830		
/. /. JOS COI N	coved Landing de Suite 209 ov (Principal office address)	TOTAL SALS		
1580 Cano	and landing the suite and	nolando Fl 208	220	
-1200 CONC	ord landing die Suite 209 (Current mailing address)	DECEMBED C CON	251	•
	- ,			
8. Name and stree	t address of Florida registered agent: (P.O. Bo	ox NOT acceptable)	 *	
	Business Filings Incorporated	- F	15 ALE	
Name:		•	AP P	- 0-4 6-1-3
Office Address:	515 E. Park Avenue		ASS.	***
	Tallahassee	, Florida 32301	mo ≯	F
	(City)	(Zip code)	AK II:	
	(City)	(Zip code)	22 F	•
9. Registered age	<u> </u>			
	ed as registered agent and to accept service of			
•	application, I hereby accept the appointment omply with the provisions of all statutes relati	9 9	-	•
•	amiliar with and accept the obligations of my		agornance of m	עי
-		- 0		

Way to Spalinger, Asst. Secretary
(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director: Sky R. Roberts
Address: 4580 Concord Landing Dr. Apt 209
Orlando, Fl 32780
Director:
Address:
B. OFFICERS
President: Sky R. Roberts
Address: 4580 Concord Canoling Dr Apt 2001
Orlando, FC 32780 V
Vice President: Amanda Ortiz
Address: 4580 Concord Landing Dr Apt 209
Orlando, FL 32780
Secretary: 5ky R. Roberts
Address: 4580 Concord Landing Dr Apt 209 oct, 71 32780
Treasurer: Sky R, Roberts
Address: 4580 Concord Landing Dr Apt 209 or 1, 71 32780 Treasurer: Sky R. Roberts Address: 4580 Concord Landing Dr Apt 209 or 1, 71 32780
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12.
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.
13. Sty R. Roberts - Director (Typed or brinted name and capacity of person signing application)
(1) beg of brunea name and cabacity of beison signing abbutanton)

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, A & E STAR HOMES, INC, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 19, 2015, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 1, 2015.

Cageuste

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150401-0410
You may verify this electronic certificate
online at http://www.nvsos.gov/