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Mr Kalla

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Your Hometown Re	alty, \nc ration - must include suffix
Name of corpor	ration - must include suffix
Dear Sir or Madam:	
4.	on for Authorization to Transact Business in Florida," d Standing" and check are submitted to register the pusiness in Florida.
Please return all correspondence concerning this i	matter to the following:
Laura !	McComs
Nar	Mc Corny ne of Person
×1 11	
Firm	Company
LODGE N	Nin Cla
405(1.	Address
Fraver V	Address ACINA NC 27526 tate and Zip code
City/S	tate and Zip code
laurams ells hones	2 amail com
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Laurencomo at (Area Code & Daytime Telephone Number
Name of Person	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 \$ S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy 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. Your Hometain Realty, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Your Honeton Realty of Florida, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. (State or country under the law of which it is incorporated)

3. (Date of incorporation)

5. NA
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 604 N. Main St. Fuguas Varcina, NC 27526

(Principal office address)

604 M. Main St. Fuguas Varina, NC 27526

(Current mailing address) residential room estate serves Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Leslie Mcallister Name: 1128 Northwest 120th Way

Gairse Ville, Florida 32406
(City) (Zip code) Office Address: 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. Kerler Malles tr

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.

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Laun A. McCorn
Address: 1029 Leke glen Dr
Chairman: Laure & McComp Address: 1629 Leke Glenon Fugury Varring NC 27526
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Valum A. M.c Comy
President: Laun A. Mc Comy Address: 1629 Lake Glen Dr. FURUAY VARINA, NC 27526
FURUAL VARINA, NC 27526
Vice President:
Address:
Secretary: Lestie McAllister
Address: 1128 Northwest 120th Way Garsentle, FL 32606
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13ha
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.
(Typed or printed name and capacity of person signing application)



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

YOUR HOMETOWN REALTY, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 10th day of August, 2004, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

16 IAN 26 PM 4: 00





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 4th day of January, 2016.

Elaine J. Marshall

Secretary of State

Certification# 97838893-1 Reference# 12861097- Page: 1 of 1 Verify this certificate online at http://www.sos.nc.gov/verification