

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000301308 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	 	 <u> </u>	

FOREIGN PROFIT/NONPROFIT CORPORATION POSITIVE HOMES, INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

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.

(If name unavails	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting busine	ss in Florida)		
2. Minnesota	y under the law of which it is incorporated)				
(State or countr			,		
4. 08/17/2005	of incorporation) 5		·		
	,		petual);		
6	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502	orida, if prior to registration) , F.S., to determine penalty liability)			
= 3030 N. Pocky Point Dr. STE 150A Tampa EL 33607					
· · · <u> </u>		office address)			
3030 N. Rock	ky Point Dr. STE 150A Tampa FL 336	07			
	(Current mailing a	ddress, if different)			
8. Name and street	et address of Florida registered agent: (P.O. I	Box NOT acceptable)			
Name:	Northwest Registered Agent, LLC.	_			
Office Address:	3030 N. Rocky Point Dr. STE 150A	_			
	Tampa	, Florida <u>33607</u>			
	(City)	(Zip eode)			

Northwest Registered Agent, LLC

Clove Glover -Manager

(Registered agent's signature)

I

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: Matthew Winn Address: 3030 N. Rocky Point Dr. STE 150A Tampa FL 33607 Director: Aaron Tuott Address: 3030 N. Rocky Point Dr. STE 150A Tampa FL 33607 **B. OFFICERS** President: Aaron Tuott Address: 3030 N. Rocky Point Dr. STE 150A Tampa FL 33607 Address: ___ Secretary: Matthew Winn Address: 3030 N. Rocky Point Dr. STE 150A Tampa FL 33607 Treasurer: Matthew Winn Address: 3030 N. Rocky Point Dr. STE 150A Tampa FL 33607 altach an addendum to the application listing additional officers and/or directors. NOTE: If necessary. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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.

Y 2 6

13. By: Matthew Winn, as Director. Positive Homes, Inc

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: POSITIVE HOMES, INC

Date Filed: 08/17/2005

File Number: 1472998-2

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 10/16/2018

OF THE ST

Oteve Vimm

Steve Simon Secretary of State State of Minnesota