## F20000000569

(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:				
W2000040421				





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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: National Renovation	ns East US, Inc.		
	ne of corporation - m	ust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign "Certificate of Existence," or "Certification to the components of the components o	ate of Good Standing	g" and check are submitted to register	
Please return all correspondence conce	erning this matter to t	he following:	
Jeff Butler			
	Name of Pers	Son	
National Renovations East L	JS. Inc.		
	Firm/Compan	y	
PO Box 910			
	Address		
Burbank, CA 91503		11	
	City/State and Z	Zip code	
jeff@repipespecialists.com	(, )		<del></del>
For further information concerning thi		uture annual report notification)	7020 JAN 24
Jeff Butler	at (818)	314-7736	=
Name of Person	Area Code	314-7736  Daytime Telephone Number	, PH 3:
STREET/COURIER ADDR Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	3; 55
Enclosed is a check for the following a Please make check payable to: <b>FLORIDA</b> \$\sum_{A}\$ \$70.00 Filing Fee   Certifica	ADEPARTMENT OF iling Fee & 🔠 \$7	78.75 Filing Fee & 💢 \$87.50 Fili:	of Status &
<b></b>	CEIVED		
	JAN 2 1 2020	RF^-	11/
	<b>Дин № - 1</b>	RE	2020

## 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. National Re	enovations East US, Inc.		
(Enter name of c	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	<del></del>
(If name unavail:	able in Florida, enter alternate comporate name a	dopted for the purpose of transacting business in Florida	<del>-</del>
	and it is is a serious and in the area and a serious and a	dopied for the purpose of transacting business in Frontie	1)
2. Delaware	y under the law of which it is incorporated)	823197833	<del></del>
404000	, ,	(FEI number, if applicable)	
4. 10/19/2017	f 5	(Date of duration, if other than perpetual)	<del></del>
	s of incorporation)	(Date of duration, if other than perpetual)	
6. <u>n/a</u>			_
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration)  2, F.S., to determine penalty liability).	
7 245 E Oliv		, , , , , , , , , , , , , , , , , , , ,	
7 <u>243 E Oliv</u>	re Ave #500, Burbank, CA 91502 (Principal offic	e street address)	_
PO Boy 01	10, Burbank, CA 91503		
O DOX 9		address, if different)	_
		·	
8. Name and street	ct address of Florida registered agent: (P.O.	Box NOT acceptable)	
·			
Name:	Incorp Services, Inc.	<u> </u>	
Office Address:	17888 67th Court North		
	Loxahatchee	Plorida 33470	
	(City)	, Florida <u>33470</u> (Zip code)	
designated in this	ent's acceptance: ned as registered agent and to accept servic application, I hereby accept the appointm	e of process for the above stated corporation at th ent as registered agent and agree to act in this cap lative to the proper and complete performance of	ačitỳ. I
<u>v</u>	(Registered agent's sig	HEFEY ON BEHALF OF mature) F. P. VICES, I.M.  not more than 90 days prior to delivery of this appli	21, PH 3:
10. Attached is a	certificate of existence duly authenticated,	not more than 90 days prior to delivery of this appli	icatión lo
the Department of	f State, by the Secretary of State or other off	ficial having custody of corporate records in the jur	isdiction
under the law of v	vhich it is incorporated.		

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

## A. DIRECTORS Name: Jeffrey L Butler □ Chairman □Chairman □Vice Chairman Address: PO Box 910 ☐ Vice Chairman Address: \_\_\_\_\_ []Director Burbank, CA 91503 □ Director R President □ President □Vice President DVice President Secretary []Treasurer ☐ Secretary □Treasurer Other \_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ □Chairman Name: \_\_\_\_\_ (I)Chairman Name: □Vice Chairman Address: ☐Vice Chairman Address: □Director Director □ President ☐ President □Vice President □Vice President ☐ Secretary □Treasurer ☐ Secretary □Treasurer Other []Other\_\_\_\_ Other \_\_\_ Other\_\_\_\_ □Chairman Name: □ Chairman Name: □Vice Chairman Address: \_\_\_\_\_\_ □Vice Chairman Address: \_\_\_\_ □Director □Director □ President □ President ☐ Vice President \_ ☐ Vice President ☐Treasurer ☐ Secretary ☐Secretary Treasurer □Other \_\_\_ Other \_\_\_\_ Other \_\_\_\_ Other\_ 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. 12. Signature of Director or Officer

The officer or director organing 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.

Jeffrey L Butler, President



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL RENOVATIONS EAST US, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF NOVEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NATIONAL RENOVATIONS EAST US, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2017.



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Authentication: 203971478

Date: 11-08-19