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COVER LETTER

то:		stration Section ion of Corporations			
SUBJ	FCT:	BLUE HOME INC			
301347		Name o	f corporation	- must include suffix	
Dear S	Sir or M	ladam:			
"Certif	ficate o	"Application by Foreign Corf Existence," or "Certificate of the Coreign corporation to tra	of Good Stand	ling" and check are submit	
Please	return	all correspondence concerning	g this matter	to the following:	
MAUR	RICIO D	NAZ			·· ~
CITYL	IOUSE	INVESTMENT INC	Name of F	Person	122 DEC 2.7
			Firm/Com	pany	· · · · · · · · · · · · · · · · · · ·
1940 N	W 93R	D AVE			P .TI
			Addre	SS	79 4
DORA	L. FLO	RIDA 33172			<u>.</u>
			City/State ar	nd Zip code	
INFO@	ECITYI	HOUSELUS			
		E-mail address:	(to be used for	or future annual report noti	fication)
For fur	rther in	formation concerning this ma	nter, please ca	all:	
MAURICIO DIAZ			at (<u>305</u>	477-6169	
	Nam	e of Person	Area Code	Daytime Telephor	ne Number
	Regis Divis The C 2415	EET/COURIER ADDRESS stration Section tion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	:	MAILING ADE Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations
Please:	make el	check for the following amoreck payable to: FLORIDA DE ing Fee	PARTMENT Fee & \Box		□ \$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.

BLUE HOME I	orporation; must include "INCORPORATED," "	COMPANY " "CORDODAT	YCNI "				
	orp," "Inc," "Co," or "Corp.")	COMPANT, CORPORAT	iOiv,				
BLUE HOMES	INC						
	name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
DELAWARE	. j	83-2621246					
(State or countr	y under the law of which it is incorporated)	(FEI number, i	if applicable)				
11/26/2018	5	<u> </u>	<u></u>				
(Date	of incorporation)	(Date of duration, if other than perpetual)					
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502						
15 16 NW 02mL A	·	, r.s., to determine penarty in	20				
1540 S.M. AMA W	VE DORAL FL 33172						
	(Principal office	street address)					
			2				
	(Current mailing a	iddress, if different)	2 - II				
			PH 3:				
Name and stree	et address of Florida registered agent: (P.O.)	Box <u>NOT</u> acceptable)					
Name:	CITYHOUSE INVESTMENT INC	_ _	$\widetilde{\mathbb{N}}$ ហ				
fice Address:	1940 NW 93 AVE						
	DORAL.	 , Florida					
	(City)	(Zip code)					
	•	, , ,					
	ent's acceptance:						
	ned as registered agent and to accept service application, I hereby accept the appointme						
	omply with the provisions of all statutes rela						
id I am familiar	with and accept the obligations of my posit	ion as registered agent.					
	/.						
	\ \ \						
	\ \ \ \ \ \						
_	(Registered ageny sagen	ature)					
	1 7 / 1						

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS MAURICIO DIAZ Name: _____ ☐Chairman □Chairman 1940 NW 93 A VE □ Vice Chainnan Address: Address: □ Vice Chairman DORAL FL 33172 □ Director Director □ President **₱**President ☐ Vice President □ Vice President □Treasurer □ Secretary □Treasurer □ Secretary □Other _____ □Other _____ □Other _____ □Other _____ Name. _____ □Chairman Name: □Chairman Address: ______ □ Vice Chairman Address: _______ □ Vice Chairman □Director □Director President President □ Vice President ☐ Vice President □ Secretary □ Secretary □Treasurer ☐Other Other ____ □Other ___ □Chairman □Chairman Name: _____ Name: ☐ Vice Chairman Address: ______ □ Vice Chairman Address: □ Director □Director □President □President □Vice President □Vice President _____ □Treasurer □ Secretary □Treasurer □ Secretary □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. Signature of Director of 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.

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BLUE HOME 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 EIGHTEENTH DAY OF NOVEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUE HOME INC."

WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF NOVEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE
BEEN PAID TO DATE.

Authentication: 204893047

Date: 11-18-22