F24000006075

(Requestor's	Name)
(Address)	
, ,	
(Address)	
(City/State/Zi	p/Phone #)
PICK-UP W	AIT MAIL
(Business En	tity Name)
(Document N	umber\
(Document N	umper)
Certified Copies Cer	tificates of Status
Special Instructions to Filing Office	per:
Penalty 124-1	56798
04:	Inn Only
Unice v	Jse Only



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2024 NOV 22 AM 9: 51

APPROVED AND FILED

RECEIVED 2014/109/22 ARTHER SELL LEVEL PROPERTY

DEC 0 3 2024 K. Brumbley



FLORIDA DEPARTMENT OF STATE Division of Corporations

submission date as file date.

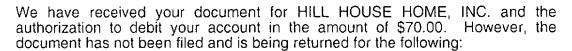
Letter Number: 124A00025696

November 25, 2024

CSC

SUBJECT: HILL HOUSE HOME, INC.

Ref. Number: W24000156798



Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$300.00.

The total amount due is \$370.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

PATTON OF THE TARTON OF THE TA

CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations

From: Ben Bolen

Ext:

Date: 11/22/24 Order #: 1690602-1

Re: Hill House Home, Inc. Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority Amount to be deducted from our State Account: \$370.00 FL State Account Number:

12000000195

Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

	tration Section ion of Corporations			
SUBJECT:	Hill House Home, Inc.			
	Name of	corporation -	- must include suffix	
Dear Sir or M	adam:			
"Certificate o		f Good Stand	Authorization to Transact Business in Florida," ling" and check are submitted to register the s in Florida.	ı
Please return	all correspondence concerning	g this matter	to the following:	
Natalie Newm	ลก			
		Name of F	Person	
Marra Law Gr	oup PC/Fixer Advisory Group L	LC		
	· ·	Firm/Comp	pany	
250 W 57th St	reet Suite 1814			
		Addre	ss	
New York, N	Y 10107			
		City/State an	nd Zip code	
	E-mail address:	(to be used fo	or future annual report notification)	
For further in	formation concerning this ma	tter, please ca	all:	
Nikou Roth	а	646		
Nam	e of Person	Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314	
	check for the following amounted payable to: FLORIDA DEI ing Fee	PARTMENT Fee &	OF STATE 1 \$78.75 Filing Fee &	

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 unavaila	ble in Florida, enter alternate corporate name ac	lopted for the purpose of transacti	ng business in Florida)		
Delaware	•		_		
(State or country	33	(FEI number, if a	policable)		
12-29-2017	-				
(Date of incorporation) 5.		(Date of duration, if other than perpetual)			
1/21/22	,	,			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		lity)		
70 Lafayette Str	eet Suite 1504, New York, NY 10012				
		e <u>street</u> address) address, if different)	20		
Name:	(Current mailing et address of Florida registered agent: (P.O. Corporation Service Company 1201 Hays Street	address, if different) Box NOT acceptable)	2024 NOV 22 AP		
Name:	(Current mailing taddress of Florida registered agent: (P.O. Corporation Service Company 1201 Hays Street Tallahassee	address, if different) Box NOT acceptable) , Florida 32301			
	(Current mailing et address of Florida registered agent: (P.O. Corporation Service Company 1201 Hays Street	address, if different) Box NOT acceptable)	2024 NOV 22 AM 9: 51		
Name: fice Address: Registered agoving been names signated in this rther agree to contain the day of the familian the signated and familian the signated to contain the signated the signated the signated the signated the signated the signature to contain the signature the sincrease the signature the signature the signature the signature t	(Current mailing taddress of Florida registered agent: (P.O. Corporation Service Company 1201 Hays Street Tallahassee	address, if different) Box NOT acceptable) , Florida 232301 (Zip code) e of process for the above state ent as registered agent and aglative to the proper and comple	ed corporation at the place to act in this capacite performance of my		

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

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		•				
☐Chairman	See attached Name:	□ Chairman	Name:			
□ Vice Chairman	Address:	□Vice Chairman	Address:	·		
□Director		□Director		<u> </u>		
□President		□President				
□Vice President	<u></u>	□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				
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				
☐Secretary	□Treasurer	Secretary		□Treasurer		
Other	Other	Other		Other		
Important Notice: individuals may be Noted Roth 12. Nikou Roth Hov 19.	Use an attachment to report more than six (6). The atta e added to the index when filing your Florida Departme	ent of State Annual R	ed for reporting peport form.	ourposes only. Non-indexed		
Signature of Director or Officer						
	ector signing this document (and who is listed in numbe alse information submitted in a document to the Depart					

(Typed or printed name and capacity of person signing application) OUAL-51729

s.817.155, F.S.

13. Nikou Roth, COO

Directors

Nell Diamond appointed 12/28/2017

Sabrina Mallick appointed 2/9/2021

Kimmy Scotti appointed 2/9/2021

Martin Dolfi appointed 3/31/2022

Officers

Nell Diamond elected 12/28/2017 (CEO, President)

Nell Diamond elected 2/9/2021 (Secretary)

Nikou Roth elected 3/31/2022 (CFO & COO)

^{**}Address for all directors and officers: 270 Lafayette Street, New York, NY 10012



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

DELAWARE, DO HEREBY CERTIFY "HILL HOUSE 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 TWENTIETH DAY OF NOVEMBER, A.D.

2024.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HILL HOUSE HOME, INC." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2017.

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



Authentication: 204924965

Date: 11-20-24

6647542 8300 SR# 20244267980